

**ASAP Virtual Annual National Training Conference Registration Form**  
**Course #1504**  
**May 25-27, 2021**

(Registration Closes on May 14, 2021 at 11:59 pm, EDT)

**The American Society of Access Professionals**

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E-mail: [asap@accesspro.org](mailto:asap@accesspro.org) Website: [www.accesspro.org](http://www.accesspro.org)

Telephone registrations ARE NOT accepted.

**To Register:**

1. Preferred – please log in at [www.accesspro.org](http://www.accesspro.org) and register on-line. (Not in the system? Contact [asap@accesspro.org](mailto:asap@accesspro.org).)
2. Please register by completing the form below and faxing or emailing it to ASAP. (See above for contact information.)

ASAP reserves the right to close registration when program capacity is reached. Upon closure, a notice will be placed on the ASAP website.) **Registrations without payment information or proper authorization signatures will NOT be accepted.** Please print clearly and avoid using abbreviations for agency names/components.

Please be advised that when you register for this training, your name or other contact information may be displayed and/or appear in the chat. This may depend on your settings. We are working to optimize privacy but may have some system constraints. Please also be aware that a registrant listing along with affiliations and city/state may be shared internally by ASAP. The staff, board and committees review this information for demographic and budgetary reasons. The names of participants registered for ASAP training may be shared among fellow attendees and sponsors including agency/company affiliation and city/state location (as submitted for registration purposes or pulled from the database). By registering for the event, participants agree to share their name, affiliation and “opted-in” contact information with fellow event attendees and event sponsors. Questions? Please contact us at [asap@accesspro.org](mailto:asap@accesspro.org).

**Please Note: Logins are monitored.**

**All Fields Required:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Agency/Org.: \_\_\_\_\_ Office: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tele: \_\_\_\_\_ Registrant E-mail: \_\_\_\_\_

- |     |    |  |                              |
|-----|----|--|------------------------------|
| Yes | No | Publish my E-mail in e-mail column of the Attendee roster.   |                              |
|     |    | ASAP Member? ASAP is a nonprofit, professional member society. Federal, state or local government employment <u>does not automatically</u> entitle one to ASAP membership or member discounted program fees. |                              |
| Yes | No | Are you an   |                              |
| Yes | No | attorney?  | If so, which state(s)? _____ |

\_\_\_\_\_ How many years have you been working in FOIA?

\_\_\_\_\_ How many years have you been working in Privacy?

Please list any special needs. ASAP, in compliance with the ADA is happy to assist (Please register by **April 30, 2021**). \_\_\_\_\_

**Payment** - Please refer to the procedures for registration, confirmations, receipts, and cancellation fee policy. Registration MUST be accompanied by a credit card and authorized signature or completed training authorization forms (SF-182).

**May 25-27, 2021**  
**Virtual NTC – Course #1504**

Tuition/Fees include the two-day training conference, presentation materials that are downloadable for confirmed registrants.

Category	Now Through April 2	April 3-30	May 1-14
Member	\$900	\$1,000	\$1,200
Nonmember	\$1,000	\$1,100	\$1,300

**Registration Closes on May 14<sup>th</sup>**

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Yes      No      Will you be applying for Virginia CLE? **If yes, please include an additional \$25 in the total amount.**

System Test: A system test will be scheduled so that registrants can test access to the virtual platform. Testing details will be sent directly to the registrants.

Cancellation/No Show Policy

1. No Shows will be charged and will not receive a refund.
2. Cancellations through April 30 receive 75% refund. (Refunds issued after the program date.)
3. May 1-14 receive a 50% refund (Refunds issued after the program date.)
4. No refunds after May 14.

**Payment Method:**

\_\_\_\_\_ Signed Training Authorization Attached (SF-182)  
\_\_\_\_\_ Government Purchase Card, Credit Card (VISA, MasterCard, American Express.) Cards are immediately processed.  
\_\_\_\_\_ Check/ Money Order Enclosed:      Check #: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**Please provide information below:**

Card Holder E-mail (**REQUIRED**): \_\_\_\_\_ **Total Amount:** \$ \_\_\_\_\_  
Card Holder Name: \_\_\_\_\_  
Card Holder Signature: \_\_\_\_\_  
Card Holder Phone: \_\_\_\_\_  
Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

*Once payment has been processed, this section of the form will be shredded.*

\_\_\_\_\_ Please contact me for full credit card number.

**Once payment has been processed, this section of the form will be shredded. Receipts are automatically emailed to cardholders.**

ASAP is incorporated in Washington, D.C. Federal Tax I.D. is 54-115-2815 DUNS is 184057818 SAM Cage # 1QTQ9.