ASAP 10th National Training Conference Registration Form Course #1235

July 24-26, 2017 – Arlington, Virginia

Renaissance Arlington Capital View Hotel - Arlington, Virginia

The American Society of Access Professionals

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E-mail: asap@accesspro.org Website: www.accesspro.org

Telephone registrations ARE NOT accepted. Please register by completing the form below and faxing or emailing it to ASAP. ASAP reserves the right to close registration when program capacity is reached. (Upon registration 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. Registration lists, name badges, certificates, etc. are based on this information. **Save \$50 by registering and paying online!** See general information for more details.

All Fields Required:

Last Name:		First Name:		Nickname:					
Title/Pos	ition:			_					
Agency/Org.:				Office:					
Mailing A	Address:								
City:			State:	Zip:					
Tele:			Registrant E-mail:						
Yes	No	Publish my E-mail in e-mail column of the Attendee roster (for registrations received by July 12).							
Yes	No			al member society. Federal, state or local government employment bership or member discounted program fees.					
Yes	No	Are you an attorney? I	f so, which state(s)?						
		How many years have yo	u been working in FOI	A?					
		How many years have yo	u been working in Priv	acy?					
		ecial needs. ASAP, in compl (Must register by July 10, 20							

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

Training Conference Tuition/Fees – (Hotel is a separate charge: per diem of \$172 for single/double occupancy)

Tuition/Fees include the one, two or three-day training conference, presentation materials that are downloadable for paid registrants, early morning coffee, mid-morning and afternoon coffee breaks.

ASAP successfully negotiated several contract incentives with the event hotel, Renaissance Arlington Capital View. These incentives are directly based on how many of our registrants stay at the event hotel. ASAP is passing this savings onto each registrant through the registration fee for those who stay at the event hotel. **Local attendees are also entitled to these lower rates.** ASAP will compare registration lists to ensure policy compliance. Registrants who paid the lower registration fee and did not stay at the Renaissance Arlington Capital View Hotel will be responsible for the difference and billed accordingly.

July 24-26, 2017 NTC Registration Deadlines

Save \$50 by registering and paying online!!!

Save \$50 by registering and paying online:::												
	By April 30		May 1 - May 31		June 1 - June 30			July 1 - July 14 (Includes Walk-Ins)				
	1-Day	2-Day	3-Day	1-Day	2-Day	3-Day	1-Day	2-Day	3-Day	1-Day	2-Day	3-Day
MEMBERS												
*Member, Local Commuter	\$475	\$800	\$900	\$525	\$850	\$950	\$575	\$900	\$1000	\$650	\$975	\$1075
Member, Staying at Event Hotel	\$475	\$800	\$900	\$525	\$850	\$950	\$575	\$900	\$1000	\$650	\$975	\$1075
Member, Staying Elsewhere (Non- local)	\$775	\$1100	\$1200	\$825	\$1150	\$1250	\$875	\$1200	\$1300	\$950	\$1275	\$1375
NONMEMBERS					,							
*Nonmember, Local Commuter	\$525	\$900	\$1000	\$575	\$950	\$1050	\$625	\$1000	\$1100	\$700	\$1075	\$1175
Nonmember, Staying at Event Hotel	\$525	\$900	\$1000	\$575	\$950	\$1050	\$625	\$1000	\$1100	\$700	\$1075	\$1175
Nonmember, Staying Elsewhere (Non-local)	\$825	\$1200	\$1300	\$875	\$1250	\$1350	\$925	\$1300	\$1400	\$1000	\$1375	\$1475

^{*}A Local Commuter is defined as an attendee who is traveling within fifty (50) miles of their office.*

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Attendance and Tuition/Fees:	Specify Days Attending (if applicable)								
Three Day Attendance									
Two Day Attendance									
One Day Attendance									
Payment Method:									
Signed Training Authorization	Attached (SF-182)								
Credit Card (VISA, MasterCar	Credit Card (VISA, MasterCard, American Express, IMPAC. Cards are processed weekly, PRIOR to the program.								
Check/ Money Order Enclosed	d: Check #:	Amount: \$							
Please provide information below:									
Card Holder E-mail (REQUIR	ED):	Total Amount: \$							
Card Holder Name:									
Card Holder Signature:									
Card Holder Phone:									
Card Number:	Once payment has been processed, this section of the for	Exp. Date:							
Please contact me for full cred	it 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.