



Date: _____

1. ATTENDEE INFORMATION

First Name: _____ Last Name: _____

Job Title (not credentials): _____

Agency/Company Name: _____

Company Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

Are you (check all that apply): Attendee Speaker Poster Presenter

Vegetarian? Yes No

2. REGISTRATION FEES

Regular Registration: Fees on or before August 15, 2017
 NWA Member Rate: \$325
 Non-Member Rate: \$400
 Single Day Member Rate: \$185 Tuesday Wednesday Thursday
 Single Day Non-Member Rate: \$245 Tuesday Wednesday Thursday

Late Registration: Fees after August 15, 2017
 NWA Member Rate: \$350
 Non-Member Rate: \$450
 Single Day Member Rate: \$185: Tuesday Wednesday Thursday
Single Day Non-Member Rate: \$245: Tuesday Wednesday Thursday

3. PAYMENT METHOD

Check Amount: _____ Check #: _____
 Purchase Order Purchase Order #: _____
Credit Card: Visa Mastercard American Express Discover Card
Card # _____ Exp Date: _____ CVC code: _____
Name on Card _____ Authorized by: _____

Submit this form by email registration@nwica.org and attach the form; or fax to 202-387-5281; or mail with your payment to: NWA, 2001 S Street NW, Suite 580, Washington, DC 20009

Once your registration has been processed, you will receive a confirmation to the email listed above. **Refunds will not be granted for cancellations received after August 15, 2017.**

Questions? Call the NWA office at 202-232-5492.