

## 2010 Annual Spring Conference Registration Form

March 26 – 29, 2010 • The Fairmont Washington Hotel, Washington, DC

**Hotel Reservation Deadline: February 22, 2010**

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

Name on Badge: \_\_\_\_\_ Title: \_\_\_\_\_


Agency Name: \_\_\_\_\_

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

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

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

 If you require special food and/or rooming accommodations, please notify us immediately

**Pre-registration deadline: March 15, 2010. After this date, please register onsite.**

Please check the appropriate box:

Registration Category	Fee	Registration Category	Fee
<input type="checkbox"/> NAPCWA Regular Member	\$500	<input type="checkbox"/> NAPCWA Regular Member for both APHSA and NAPCWA Conferences	\$750
<input type="checkbox"/> NAPCWA Associate Member	\$550	<input type="checkbox"/> Nonmember for both APHSA and NAPCWA Conferences	\$950
<input type="checkbox"/> Nonmember for NAPCWA only	\$600	<input type="checkbox"/> One Day Only (Saturday 03/27)	\$250
<input type="checkbox"/> Vendor*	\$700		

Total Payment \_\_\_\_\_

\*A vendor is defined as anyone who is neither a federal, state, city or county government employee nor an employee of a 501(c)(3) organization.

**All registrations require prepayment by one of the following methods (please check one):**

Purchase Order No. \_\_\_\_\_  Amex  MasterCard  Visa  Check

**\*A purchase order is required if payment is not received with registration form.**

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Today's Date \_\_\_\_\_

Signature \_\_\_\_\_ Name on Credit Card \_\_\_\_\_

**Checks should be made payable to APHSA. Please reference attendee and conference name on all payments.**

- **HOTEL:** The Fairmont Washington Hotel, 2401 M Street, NW Washington, DC 20036—\$226.00 for either a single or double room. Call (202) 429-2400 or (800) 441-1414 by **February 22, 2010** to receive this rate.
- **CONFIRMATIONS/RECEIPTS:** Confirmations will be e-mailed to each attendee. Receipts will be placed inside name badge at check-in.
- **NOTE:** Please attach all payments to registration form; one form per registrant. **To be invoiced by APHSA, you must have a purchase order and the purchase order must be received by the start of the conference.** Please return invoice when sending payment. Check in at registration desk to receive name badge and conference materials.
- **CANCELLATION POLICY:** All cancellation requests must be received in writing by **March 1, 2010**. No refunds will be available after this date. We will not accept cancellation requests by phone. **A \$100 cancellation fee will be assessed for both pre-paid registrations and for those invoiced on a purchase order.** All refunds will be available after the conference. Registration fees for "no shows" will not be refunded.

**Fax or Mail to:** Freddy Wiggins, x264, [fwiggins@aphsa.org](mailto:fwiggins@aphsa.org) or Bobbie Westmoreland, x255, [westmoreland@aphsa.org](mailto:westmoreland@aphsa.org), APHSA, 1133 Nineteenth Street, NW, Suite 400, Washington, DC 20036—Tel: (202) 682-0100; Fax: (202) 408-5947; <http://www.aphsa.org>

For APHSA Use Only: Date _____ ID# _____ APHSA Inv. # _____ Check Amount _____
Batch _____ Voucher/PO#: _____ Processor Initials: _____