

ANNUAL CONFERENCE & INSTITUTE REGISTRATION FORM

Registrant Information:

Registrant Name _____ Membership # _____
(First) (Last) (CEOE)

How should your first name appear on your name badge? _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____

Email address _____

Office Phone _____

I authorize NAEOP to publish/post my email address in the annual report.

Cell Phone _____

YES NO

Complete only ONE section below, either Full Registration OR Single Event Registration.

Full Registration:

Paid by May 15

Paid after May 15

(Full registration fee includes: Area Brunch, Council Lunch, Awards/PSP and Installation Banquets. **DOES NOT INCLUDE** Institute, Briefings, Optional Events and/or Guest fees.)

Full Registration—Member \$300 \$350 \$ _____

Full Registration—Non-member \$355 \$405 \$ _____

Check Appropriate Menu A or B:

Awards/PSP Banquet: A B

Installation Banquet: A B

Receiving PSP/CEOE recognition? _____

(must be current member)

TOTAL FULL REGISTRATION FEES: \$ _____

(Transfer to next page)

Single Event Registration:

Paid by May 15

Paid after May 15

Single Registration—Member \$155 \$205 \$ _____

Single Registration—Non-member \$200 \$250 \$ _____

Area Brunch \$36 Council Lunch \$ 42

Check Appropriate Menu A or B:

Awards/PSP Banquet \$62: A B

Installation Banquet \$70: A B

Receiving PSP/CEOE recognition? _____

(must be current member)

TOTAL MEALS: \$ _____

TOTAL SINGLE EVENT REGISTRAITON FEES (Registration and Meals only): \$ _____

(Transfer to next page)

Optionals:

First Timer Orientation (No Charge)

First Timer Conference Bag (No Charge to First Timers)

I would like to be a First Timer Mentor

Conference Bag \$10

TOTAL OPTIONALS: \$ _____

(Transfer to next page)

Additional Important Information:

Special Dietary Needs or Disability: _____

Emergency Contact Name: _____ Phone: _____

Guest/Spouse Registration:

Guest Fee: \$25/each guest \$ _____

Guest Name: _____

Address: _____

City: _____ State: _____ Zip: _____

(Attach additional guest contact information to registration form.)

Indicate total guest meal choices in selection boxes below.)

Area Brunch \$36 \$ _____

Council Lunch \$42 \$ _____

Awards/PSP Banquet A B \$62 \$ _____

Installation Banquet A B \$70 \$ _____

TOTAL GUEST FEES \$ _____

(Transfer to next page)

ANNUAL CONFERENCE & INSTITUTE REGISTRATION FORM

Registrant Name: _____

	Monday, July 16, 2018				
✓	IN101	Monday	8:00 am – 5:00 pm	Personalities, Communication & Decision Making...oh my.	\$130
	IN102	Monday	8:00 am – 12:00 pm	OUCH! That Stereotype Hurts!	\$65
	IN103	Monday	1:00 pm – 5:00 pm	Human Capital	\$65
	Tuesday, July 17, 2018				
✓	IN201	Tuesday	8:00 am – 12:00 pm	Personalities, Communication & Decision Making...oh my <i>(continued from Monday)</i>	\$65
	IN202	Tuesday	1:30 pm – 5:00 pm	From Exhaustion to Exhilaration: Time & Stress Management Tips for Overworked Office Professionals	\$65
	IN203	Tuesday	8:00 am – 5:00 pm	Linking your Brain, Heart & Voice...rewire to connect authentically, communicate effectively, and thrive collectively	\$130

Check desired Institute classes:

TOTAL INSTITUTE FEES:

\$ _____

LATE FEE (if needed):

\$ _____

(Add \$35 after May 15)

(Transfer total below)

Briefings:

Briefing I Tues. 8-9:30	Briefing II Tues. 9:45-11:15	Briefing III Tues. 12:30 – 2:00	Briefing IV Tues. 2:45 –4:15	Briefing V Wed. 11:30 - 1:00	Briefing VI Wed. 1:15 – 2:45
<input type="checkbox"/> 101 \$10	<input type="checkbox"/> 201 \$10	<input type="checkbox"/> 301 \$10	<input type="checkbox"/> 401 \$10	<input type="checkbox"/> 501 \$10	<input type="checkbox"/> 601 \$10
<input type="checkbox"/> 102 \$10	<input type="checkbox"/> 202 \$10	<input type="checkbox"/> 302 \$10	<input type="checkbox"/> 402 \$10	<input type="checkbox"/> 502 \$10	<input type="checkbox"/> 602 \$10
<input type="checkbox"/> 103 \$10	<input type="checkbox"/> 203 \$10	<input type="checkbox"/> 303 \$10	<input type="checkbox"/> 403 \$10	<input type="checkbox"/> 503 \$10	<input type="checkbox"/> 603 \$10
<input type="checkbox"/> 104 \$10	<input type="checkbox"/> 204 \$10	<input type="checkbox"/> 304 \$10	<input type="checkbox"/> 404 (moved to 205)	<input type="checkbox"/> 504 \$10	<input type="checkbox"/> 604 \$10
	<input type="checkbox"/> 205 (FREE)	<input type="checkbox"/> 305 \$10	<input type="checkbox"/> 405 \$10	<input type="checkbox"/> 505 \$10	<input type="checkbox"/> 605 \$10
			<input type="checkbox"/> 406 \$10	<input type="checkbox"/> 506 \$10	<input type="checkbox"/> 606 \$10
Briefing VII Wed. 3:00 – 4:30	Briefing VIII Thurs. 8:00 – 9:30	Briefing IX Thurs. 9:45 – 11:15	TOTAL BRIEFINGS: \$		
<input type="checkbox"/> 701 \$10	<input type="checkbox"/> 801 \$10	<input type="checkbox"/> 901 \$10	(Transfer below)		
<input type="checkbox"/> 702 \$10	<input type="checkbox"/> 802 \$10	<input type="checkbox"/> 902 \$10	TOTAL REGISTRATION FEES: \$ _____ TOTAL OPTIONALS: \$ _____ TOTAL GUEST FEES: \$ _____ TOTAL INSTITUTE FEES: \$ _____ TOTAL BRIEFINGS: \$ _____ TOTAL CONFERENCE FEES \$ _____		
<input type="checkbox"/> 703 \$10	<input type="checkbox"/> 803 \$10	<input type="checkbox"/> 903 \$10			
<input type="checkbox"/> 704 \$10	<input type="checkbox"/> 804 \$10				
<input type="checkbox"/> 705 \$10					
<input type="checkbox"/> 706 \$10					

Payment Method (All fees are payable in U.S. dollars):

Copy of Purchase Order is attached (**Must be paid by conference date**)

Enclosed is a check or money order payable to NAEOP

*Credit Card Number _____ Exp. Date _____ Security Code _____

Name on Credit Card _____

Billing Address of Credit Card _____

*Please note: a \$5 convenience fee is applied to all credit card transactions. Signature _____

Early Bird registration deadline is May 15, 2018. You must register by May 15, 2018 to be listed in the annual report. After June 15, bring the form with you for onsite processing. Onsite registration will be accepted on a space available basis. Meal tickets, however, may not be available onsite.

CANCELLATION/REFUND POLICY: All cancellation requests must be received in writing to the national office. Cancellations received on or before June 1 will entitle the registrant to a full refund less a \$25 administrative fee. Cancellations received between June 1 and June 15 will entitle the registrant to a 50% refund. There are no refunds for registration or meals after June 15, 2017. No-shows will not be refunded. Selection and reservation of payment for hotel accommodations, tours, and transportation to and from the conference are the sole responsibility of the registrant.