



Registration Form

NSLDC PRIDE NYC 2019

Mail or Fax this form, or Register Online at www.nsldcpride.org

Contact Information

College/University _____

*Contact Name _____

*This person will be the main contact for your group

Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ FAX _____ E-mail _____

Registrant Information

Registrant #1

Name _____ Title _____ E-mail _____

Cell Phone Number _____ Attendee Type: Student

Advisor _____ T-Shirt Size: S M L XL 2XL Preferred Pronouns
(Optional): _____

Registrant #2

Name _____ Title _____ E-mail _____

Cell Phone Number _____ Attendee Type: Student

Advisor _____ T-Shirt Size: S M L XL 2XL Preferred Pronouns
(Optional): _____

Registrant #3

Name _____ Title _____ E-mail _____

Cell Phone Number _____ Attendee Type: Student

Advisor _____ T-Shirt Size: S M L XL 2XL Preferred Pronouns
(Optional): _____

Registrant #4

Name _____ Title _____ E-mail _____

Cell Phone Number _____ Attendee

Type: Student Advisor T-Shirt Size: S M L XL 2XL Preferred
Pronouns (Optional): _____

Registrant #5

Name _____ Title _____ E-mail _____

Cell Phone Number _____ Attendee

Type: Student Advisor T-Shirt Size: S M L XL 2XL Preferred

Pronouns (Optional): _____

Registrant #6

Name _____ Title _____ E-mail _____

Cell Phone Number _____ Attendee

Type: Student Advisor T-Shirt Size: S M L XL 2XL Preferred

Pronouns (Optional): _____

The earlier a college or university registers, the more affordable the conference becomes. Your school can register today and submit names later in the year. All Registrations must be received or post-marked before the dates below. Registration cost is per person.

All registrations must be received or post-marked before the dates below.

	Early Bird July 30, 2019	Standard September 30, 2019	Last Chance / On-Site
1-6 People (Per Person)	\$345.00	\$375.00	\$395.00
7-14 People (Per Person)	\$335.00	\$365.00	\$385.00
14+ People (Per Person)	\$325.00	\$355.00	\$375.00

Registration Fee: \$ _____ x _____ (# of attendees)

Grand Total in U.S. Dollars: \$ _____

Payment Methods (All registrations must be paid by the conference date)

Check enclosed (make payable to The Miller Institute)

Bill Me (NSLDC's Federal ID #26-1302800) Our Purchase Order Number is: _____

Charge my credit card: MasterCard Visa Discover AmEx

Credit Card #: _____ Exp. Date: _____ CVN (3-digit code): _____

Name on Card: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

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- **Cancellation Policy:** All cancellations must be received in writing 15 days before the conference date. Refunds will be given only for cancellations received 30 days before the beginning date of this conference, less a \$100 processing fee per person and any credit-card processing fees. No refunds of any kind will be made after this date. Students and/or advisors who register but do not attend the conference will pay the entire registration fee, but name changes to your list of registrants may be made at any time.
 - **Special Needs:** If you have accessibility or accommodations needs that fall under the regulations of the Americans with Disabilities Act, please write to Info@nslcdc.org. Registrants shall be responsible for the cost of any auxiliary aids (including engagement of and payment to specialized services providers, such as sign-language interpreters). Any requests must be submitted in writing at least six weeks before the conference.

I have read all the conditions of this registration form and accept the terms.

X Signature: _____ (required) I agree to the terms outlined above.