

# NACUA November 2016 CLE Workshop

## NON-MEMBER REGISTRATION FORM

### PERSONAL INFORMATION

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

Badge Name: \_\_\_\_\_

Title: \_\_\_\_\_

Institution/ Firm: \_\_\_\_\_

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

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

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Special Needs \_\_\_\_\_

Check here if you have special needs and might require accommodations to fully participate in the workshop. A staff member will contact you for details.

Dietary Requirements: \_\_\_\_\_

### REGISTRATION

Fees include all sessions, coffee breaks, continental breakfasts, luncheon, reception, CLE credit fee, binder of session materials, pre- and post-event online access to materials.

#### A. REGISTRATION FEES

|  | EARLY         | REGULAR (RECEIVED AFTER OCTOBER 21) |      |
|--|---------------|-------------------------------------|------|
| Non-Member   | \$790         | \$840                               | = \$ |
| Member Institution Representative  | \$690         | \$740                               | = \$ |
| Eligibility Verification (required for registration)   |               |                                     |      |
| <input type="checkbox"/> I am not a member of NACUA. I have received approval from my Primary Representative and the endorsement letter is attached. (To find out your primary representative, please email <a href="mailto:membership@nacua.org">membership@nacua.org</a> ) |               |                                     |      |
| Member of Cooperating Organization   | \$690         | \$740                               | = \$ |
| Non-Member Speaker*  | complimentary |                                     | = \$ |

\* Discussion group leaders and moderators must pay the non-member registration fee above.

TOTAL AMOUNT TO ACCOMPANY REGISTRATION: = \$

#### B. BINDER OF MATERIALS

All attendees will receive digital access to session materials both before and after the program. If you would also like to receive the printed binder of materials on site, please check here:

#### C. CLE CREDIT (complete only if you wish NACUA to apply on your behalf)

State: \_\_\_\_\_ Bar #: \_\_\_\_\_

State: \_\_\_\_\_ Bar #: \_\_\_\_\_

#### D. NETWORKING EVENTS

- Reception • Wednesday, 5:30 p.m.       Continental Breakfast • Thursday, 7:00 a.m.  
 Networking Lunch • Thursday, 12:00 p.m.       Continental Breakfast • Friday, 7:00 a.m.

Please check the event(s) you plan to attend. Costs are included in your registration fee.

**Non-Member rates** apply to attorneys or other administrators representing or employed by colleges or universities that are NOT NACUA member institutions. Or an outside attorney (i.e. law firm attorney) who represents a NACUA member institution but is not listed on the official roster.

**Member-Institution Representative rates** apply to employees at NACUA member institutions who are not on the official membership roster.

#### PAYMENT:

Upon receipt of your registration form, NACUA will contact you, via email, regarding payment (if applicable).

# **NACUA**

## **Sample Non-member Meeting Attendee Endorsement Letter**

**November 2016**

### **In-House Counsel**

To: NACUA Meetings Department

As the primary representative for <NAME OF MEMBER INSTITUTION>, I endorse the registration of <REGISTRANT'S NAME> to attend the <Name of Educational Program>. As the <REGISTRANT'S TITLE>, he/she is responsible for <Areas of relevant responsibility to the educational program> and would benefit from attending this upcoming educational program.

Sincerely,

<Signature and Printed Name of Primary Representative>

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### **External Counsel**

To: NACUA Meetings Department

As the primary representative for <NAME OF MEMBER INSTITUTION>, I endorse the registration of <REGISTRANT'S NAME> to attend the <Name of Educational Program>. As an external counsel, <REGISTRANT'S NAME> is currently engaged to represent my institution on legal matters. He/She is a licensed attorney in good standing in at least one state and has a commonality of interest with NACUA member institutions.

Sincerely,

<Signature and Printed Name of Primary Representative>