

REGISTRATION Please PRINT name as it should appear on name tag. **Please use a separate form for each person attending.**

First Name _____ Last Name _____ Nickname for Badge _____

Title/Department _____ Company Name _____

Company Address _____

City _____ State _____ Zip _____

Telephone _____ Cell Phone _____ Fax _____

Email _____ Twitter@ _____

Spouse/Companion Name _____ Nickname for Badge _____

Home Address (needed for congressional appointments) _____

City _____ State _____ Zip+4 (REQUIRED w/ plus 4) _____

Are you a first-time attendee to the Washington Fly-In? Yes No

ADDITIONAL CONGRESSIONAL AND REGULATORY MEETING INFORMATION (PLEASE COMPLETE IN FULL)
Please list any other senators/representatives* in whose district(s) your company has additional facilities with whom you would like to meet.
Please list Members of Congress or staff with whom you have a pre-existing relationship.
Please list Fly-In attendee(s) that you would like to accompany to the same meetings (if possible, such as spouse, child, employees, etc.).
Would you like to participate in meetings with key regulatory officials on the morning of May 2 (instead of returning to the Hill)? Yes <input type="checkbox"/> No <input type="checkbox"/>

*Please note that congressional offices determine meeting availability. NACD cannot guarantee meetings.

REGISTRATION FORMS DUE APRIL 22, 2019**

**Late registrations are accepted but make scheduling Hill meetings very difficult. It is advisable to register early.

REGISTRATION ITEMS (CHOOSE ONE)	FEE	AMOUNT
Materials, Congress 101 orientation, congressional reception, Thursday breakfast, hospitality room, and lunch are included.		
2019 NACD Washington Fly-In, May 1 - 2, 2019 – Member	\$465	
2019 NACD Washington Fly-In, May 1 - 2, 2019 – Spouse	\$465	
Emerging Leader Member Attendee Registration	\$199	
TOTAL DUE:		

Special Needs or Diet Restrictions:

Payment Information: American Express MasterCard Visa Check/Money Order Enclosed (Payable to NACD)

Credit Card # _____ Expiration Date _____ Security Code _____

Card Member's Name (Print) _____ Signature _____

Return your completed registration form via fax (703) 527-7747, email meetings@nacd.com, or mail to NACD, 1560 Wilson Blvd., Ste. 1100, Arlington, VA 22209

Meeting Registration Cancellation Policy: Cancellations must be made in writing to meetings@nacd.com or by faxing to NACD at (703) 527-7747. Cancellations received 15 days prior to the first day of the event entitle registrant to a refund minus an administrative charge of 25% of the gross registration and activities fees. After this date, no refunds will be issued. Substitutions can be made at any time. (There is no fee for substitutions.)