

**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 \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

First Time Exhibitor or Attendee? Yes  No

REGISTRATION ITEMS (CHOOSE ONE)	MEMBER/AFFILIATE FEE	NON-MEMBER FEE*	AMOUNT DUE
Responsible Distribution Candidacy Class, August 12	FREE	N/A	
Responsible Distribution Workshop ONLY, August 13	\$435 <i>After 7/19 \$535</i>	\$635 <i>After 7/19 \$735</i>	
Regulatory Workshop (TSCA Focused) ONLY, August 14	\$435 <i>After 7/19 \$535</i>	\$635 <i>After 7/19 \$735</i>	
ChemEdge ONLY	\$ 725 <i>After 7/19 \$925</i>	\$ 925 <i>After 7/19 \$1,125</i>	
ChemEdge + Responsible Distribution Workshop COMBO	\$1075 <i>After 7/19 \$1,375</i>	\$1325 <i>After 7/19 \$1,625</i>	
ChemEdge + Regulatory Workshop COMBO	\$1075 <i>After 7/19 \$1,375</i>	\$1325 <i>After 7/19 \$1,625</i>	
ChemEdge + Responsible Distribution Workshop + Regulatory Workshop TRIO	\$1475 <i>After 7/19 \$1,775</i>	\$1775 <i>After 7/19 \$2,075</i>	
Emerging Leaders ChemEdge Participant Registration	\$425	N/A	
Emerging Leaders Alumni (Completed in 2017 or 2018) ChemEdge Participant Registration	\$550	N/A	
Exhibitor 1 <sup>st</sup> Attendee - (Please provide your booth # _____) First person registering to staff booth is complimentary.	FREE	FREE	
Exhibitor - Additional Attendee (Please provide your booth # _____) Please use a separate form for each person staffing the booth.	\$500	\$500	

**TOTAL DUE:**

ACTIVITIES		
<b>Tuesday Responsible Distribution &amp; Regulatory Workshop Reception, August 13 (Workshop Attendees ONLY)</b> Will attend? <input type="checkbox"/> Yes <input type="checkbox"/> No	Included in registration	
<b>Golf Outing, Wednesday, August 14</b> (Transportation included) Handicap: ____ Do you need rental clubs? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> L	\$149 \$30/per set	
<b>ChemEdge Attendees -- Wednesday First Timers Reception</b> Will attend? <input type="checkbox"/> Yes <input type="checkbox"/> No	Included in registration	
<b>ChemEdge Attendees -- Thursday Night Event at Tavern on 4<sup>th</sup></b> Will attend? <input type="checkbox"/> Yes <input type="checkbox"/> No	Included in registration	

**Special Needs or Diet Restrictions:**

*\*Nonmember fees apply to any non-NACD member, including contractors or consultants hired by NACD members.*

**Payment Information:**  American Express  MasterCard  Visa  Check 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, e-mail [meetings@nacd.com](mailto: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 via email at [meetings@nacd.com](mailto:meetings@nacd.com). Cancellations received on or before **July 12**, entitle registrant to a refund minus an administrative charge of 25% of the gross registration and activities fees. After **July 12**, no refunds will be issued. Substitutions can be made at any time. (There is no fee for substitutions.)