

2012 National Conference Registration Form

**Use photocopies of this form for additional registrations.
Payment does not have to accompany the registration form.**

Fax to 301.924.0265 or mail to National Conference, PO Box 535, Olney, MD 20830.

Full name: _____
First name (as preferred for badge): _____
Title: _____
Company/Organization: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____

Make Check or Purchase Order payable to National Conference
Federal ID# 52-1225575 – (Weil Communications & Marketing, Inc.)

Registration Amount Due: \$ _____ Send Invoice
 By check # _____ By Purchase Order # _____
By credit card: Visa Mastercard American Express Discover
Credit card #: _____ Exp. Date: ___/___
Name on card: _____
Signature: _____
Credit card billing address (If different than above):
Address: _____
City: _____ State: _____ Zip: _____

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| PRE-CONFERENCE WORKSHOP SIGN UP | |
| CHECK BELOW IF YOU ARE ATTENDING ONE OF THE PRE-CONFERENCE WORKSHOPS ON MONDAY AFTERNOON, APRIL 30TH | |
| _____ | Technical Assistance Workshop for Grantees: Implementation to Closeout |
| _____ | Risk Assessment and Low-Cost Lead Hazard Control Methods |
| _____ | Healthy Housing Assessment and Remediation Protocols |
| _____ | Child Lead Screening Strategies |
| _____ | Eco-Healthy Child Care Train the Trainer Program |
| Payment Information: | _____ \$50 per workshop added to Registration Fee |
| | _____ No charge for workshops. I am a member of: |
| | _____ National Association of Lead and Healthy Homes Grantees |
| | _____ Lead and Environmental Hazards Association (LEHA) |

REGISTRATION CANCELLATION POLICY: Cancellations must be in writing. Refunds will be given to all requests received up to 72 hours before the first day of the conference, less a \$45.00 cancellation fee. No refunds will be given for "no shows".