



**2010 NACAS East Conference**  
**Delegate Registration Form**  
 June 13-16, 2010  
**The Hyatt Regency Cambridge**



Conference registration fees include all sessions, materials, functions, meals (except Monday night on your own) and transportation to off-site events. Golf and kayak outings are not included in the registration fee. If you have questions, please contact Maria Hoagland (845-938-2250 / [Maria.Hoagland@usma.edu](mailto:Maria.Hoagland@usma.edu)).

Hotel reservations may be made by calling The Hyatt Regency Cambridge (617-492-1234). Group room rates are \$199.00/night + taxes and are available until May 7, 2010 or until the block sells out, whichever comes first. Please visit the NACAS East website at [www.nacas.org](http://www.nacas.org) for additional information and website link to the hotel.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Nickname for badge \_\_\_\_\_

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

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Spouse/Guest/Children's Names: \_\_\_\_\_  
*(add fees below)*

<u>Conference Registration Fees</u>				<u>Total Fee:</u>
NACAS-East Member	\$325	x	_____ number of members	\$ _____
Non-Member	\$375	x	_____ number of members	\$ _____
Retired NACAS Member	\$125	x	_____ number of members	\$ _____
Kayak Tour	\$ 55	x	_____ number of members	\$ _____
Golf Outing	\$155	x	_____ number of members	\$ _____
Spouse/Guest	\$150	x	_____ number of members	\$ _____
Children	\$ 75	x	_____ number of members	\$ _____
<b>Total due:</b>				<b>\$ _____</b>

When do you plan to arrive? \_\_\_\_\_ When do you plan to depart? \_\_\_\_\_

Do you plan to attend the gala on Tuesday June 15? Yes \_\_\_\_\_ No \_\_\_\_\_

Would you like to attend the tour of Boston University on Sunday, June 13? Yes \_\_\_\_\_ No \_\_\_\_\_

Is this your first NACAS East Conference? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, are you willing to serve as a mentor to a conference first-timer? Yes \_\_\_\_\_ No \_\_\_\_\_

Would you like someone to contact you about volunteer opportunities within NACAS? Yes \_\_\_\_\_ No \_\_\_\_\_

For conference meals, would you prefer a vegetarian or vegan entrée? Please specify: \_\_\_\_\_

Do you have any dietary restrictions? Please specify: \_\_\_\_\_

**Payment made by:**  MasterCard  Visa  AMEX  
 Check (payable to NACAS East)  Purchase Order # \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name on Card: \_\_\_\_\_ Registration Application Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ **Total Enclosed:** \$ \_\_\_\_\_

**Complete registration materials and return to NACAS East:**

2010 NACAS East Conference Registration  
 PO Box 5546, Charlottesville, VA 22905-5546  
 Fax: 434-245-8453 / Email: [info@nacas.org](mailto:info@nacas.org)

NACAS East tax identification number: 16-0999454