REGISTRATION FORM



NCDA Global Career Development Conference June 21-23, 2018 • Phoenix , Arizona

Please check here if you are a
first-time attendee.

Name for Badge Organization Mailing Address City/State/Zip/Country Phone/Fax Email	Name	
Organization Mailing Address City/State/Zip/Country Phone/Fax Email		
Organization Mailing Address City/State/Zip/Country Phone/Fax Email	Name for Badge	
Mailing Address City/State/Zip/Country Phone/Fax Email		
Mailing Address City/State/Zip/Country Phone/Fax Email	Organization	
City/State/Zip/Country Phone/Fax Email		
Phone/FaxEmail	Mailing Address	
Phone/FaxEmail		
Email	City/State/Zip/Country	
Email		
	Phone/Fax	
	Email(please print email address clearly)	
Please identify which constituency group best describes you:	Please identify which constituency group best describes you:	
☐ School Career Counselors & Specialists ☐ Independent Practice, B&I, and Agencies	☐ School Career Counselors & Specialists ☐ Independent	t Practice, B&I, and Agencies
☐ Higher Education Career Counselors & Specialists ☐ Counselor Educators & Researchers	☐ Higher Education Career Counselors & Specialists ☐ Counselor E	ducators & Researchers

Professional Development Institutes

On-site registration cannot be guaranteed. Space is limited. Fee is PER SERIES. PDIs are OPTIONAL and are not included in Conference Registration fees.

Series 1: Wed., June 20, 8:00 am – 12:00 pm (please indicate selection)

🔲 PDI #1	PDI #2	☐ PDI #3	☐ PDI #4

NCDA Student/Retired/New Professional

NCDA Member

Non-Member

Non-Member
Series 2: Wed., June 20, 1:30 – 5:30 pm (please indicate selection)

☐ PDI #5 ☐ PDI #6	☐ PDI #7	☐ PDI #8
NCDA Member		

NCDA Student/Retired/New Professional	
Non-Member	

Full Conference Registration, June 21-23, 2018

Includes all presentations, exhibits, breaks, and NCDA Party.

Professional Development Institutes must be purchased separately.

NCDA Member
NCDA Student/Retired/New Professional
Non-Member

One-Day Registration

Includes all presentations, exhibits, and breaks for the specified day.

Please indicate:
Thursday Friday Saturday

NCDA Member	
NCDA Student/Retired/New Professional	
Non-Member	

\$200	\$250	\$
\$200 \$200 \$200	\$250 \$250 \$250	\$ \$ \$

\$550

\$415

\$650

\$350

\$350

\$350

IMPORTANT: NCDA Headquarters will not accept registrations in the office after

TOTAL

May 31. Please plan to register on-site if you wish to register after May 31, 2018.

Late Registration

After 5/31/18

\$250

\$250

Registration

2/5/18 - 5/31/18

\$200

\$200

\$450

\$315

\$550

\$250

\$250

\$250

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How to Register



Securely Online at www.ncdaconference.org (preferred method) Major credit cards accepted.



Mail

Check or Credit Card accepted.
Send Registration Form and payment to:
NCDA, 305 North Beech Circle,
Broken Arrow, OK 74012



Fax

Purchase Order or Credit Card accepted. Fax: (918) 663-7058

Confirmations will be sent via email.

Cancellation Policy

Cancellations received in writing prior to May 31, 2018 will be subject to a \$50 (US funds) processing fee. Due to costs incurred on your behalf, NO REFUNDS will be given after May 31. If paying via purchase order, your organization will be required to fulfill the Purchase Order even though you do not attend due to costs incurred on your behalf. Refunds will not be given for conference no-shows due to costs incurred on your behalf.

Substitutions

Substitutions will be accepted if received in writing from the original registrant by May 31, 2018. A letter from the original registrant authorizing the substitution must be emailed to nscrimsher@ncda.org or faxed to (918) 663-7058, along with the substitute's completed registration form, by May 31. The substitute's registration fee will be subject to pricing based on her/his NCDA membership status.

Questions?

Visit our website at www.ncdaconference.org NCDA Headquarters at: 305 North Beech Circle, Broken Arrow, OK 74012 (866) 367-6232 (FOR-NCDA) or (918) 663-7060 Fax: (918) 663-7058 Email: nscrimsher@ncda.org

Signature _

SPECIA	L NEEDS	
lease indicate any special needs you may hav	ve. 🔲 Dietary 🔲 Physical	
lease provide a brief description of special ne	eeds:	
AMBASSADO	OR PROGRAM	
I am interested in being an NCDA International Ambassador at the conference.	☐ I am an international and interested in har Ambassador at the	aving an NCD
NCDA ME	MBERSHIP	
Yes, I would like to join/renew NCDA me registration fees.	embership and save on m	y conference
Regular Membe r (annual fee) or those who have an interest or involvement in areer development.	\$85	\$
itudent Member (annual fee) tudents enrolled in programs preparing them for	\$35	\$
ounseling and other career development areas.		
	als	\$
ounseling and other career development areas. Jew Professional Member (annual fee) or graduates in their first year of employment in the areer development field OR anyone new to NCDA egardless of employment history. New Professionare offered reduced membership dues for a limit of	he als	\$
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