

# **REGISTRATION FORM**

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

**IMPORTANT:**REGISTRATION CLOSES ON JUNE 8, 2021

Name			
viailing Address <sub>.</sub>			
City/State/Zip/Co	ountry		
Phone/Fax			
Email			
		ail address clearly)	
	Please identify which constitue	ncy group best describes you:	
	School Career Counselors & Specialists	☐ Private Practice, Business/Industry & Agencies	
	☐ Higher Education Career Counselors & Specialists	☐ Counselor Educators & Researchers	
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# SECURE ONLINE REGISTRATION AVAILABLE AT: www.ncdaconference.org

Provides you with 15 Continuing Education hours. Includes access to all Live, On-Demand sessions, networking opportunities, and exhibitors.	Registration After March 31	TOTAL
NCDA Member	\$229	\$
NCDA Student/Retired/New Professional Member	\$189	\$
Non-Member	\$329	\$
Provides you with 25 Continuing Education hours. Includes access to all Live, On-Demand sessions, networking opportunities, and exhibitors.	Registration After March 31	
NCDA Member	\$279	\$
NCDA Student/Retired/New Professional Member	\$259	\$
Non-Member	\$409	\$



# Visit our website at www.ncdaconference.org

NCDA HEADQUARTERS: 305 North Beech Circle, Broken Arrow, OK 74012 (918) 663-7060 • Fax: (918) 663-7058 • Email: nscrimsher@ncda.org

# REGISTRATION FORM



A Kaleidoscope of Career Interventions in an Age of Uncertainty VIRTUAL - JUNE 29 - JULY 1, 2021

# **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



Purchase Order or Credit Card accepted. Fax: (918) 663-7058 Confirmation will be sent via email.

# **Cancellation Policy**

Cancellations received in writing prior to June 8, 2021 will be subject to a \$50 US processing fee. NO refunds will be given after June 8, 2021 or after access to the conference app has been given. If paying via purchase order, your organization will be required to fulfill the purchase order though you do not attend. Refunds will not be given for no-shows after the conference.

### **Substitution Policy**

Attendee substitutions will be accepted if received in writing from the original registrant before June 8, 2021. Requests may be emailed to Natalie Scrimsher at nscrimsher@ncda.org. Registration fees will be based on substitute's membership status.

## Attendee Image Policy

Registration and attendance at, or participation in, the National Career Development Association (NCDA) conferences, meetings, and events constitutes an agreement by the registrant to NCDA for use and distribution, now and in the future, of the registrant or attendees' image or voice in photographs, videotapes, electronic reproductions and audio of such events and activities to illustrate and promote the NCDA experience and products.

#### **NCDA MEMBERSHIP**

Yes, I would like to join/renew NCDA members save on my conference registration fees.	hip and	
<b>Regular Membe</b> r (annual fee) For those who have an interest or involvement in career development.	\$95	\$
<b>Student Member</b> (annual fee) Students enrolled in programs preparing them for counseling and other career development areas.	\$40	\$
New Professional Member (annual fee) For graduates in their first year of employment in the career development field OR anyone new to NCDA regardless of employment history. New Professionals are offered reduced membership dues for a limit of one year.	\$40	\$

## **PRIVACY STATEMENT**

I have read and understand the NCDA Privacy Statement. The NCDA Privacy Policy can be
found at www.ncda.org.

#### **PAYMENT**

- · Payment must accompany registration form or registration will not be processed.
- Purchase Order Payments: A copy of PO must accompany registration form.
- Payment must be made in U.S. dollars. Foreign payment must include exchange fees.
- · Payment must be made payable to: National Career Development Association (FEI#: 52-6045839)
- A W-9 Form can be found at www.ncdaconference.org, click on Registration.

Check	Credit Card	☐ Purchase Order #	
Credit Card N	Number		
Expiration D	ate	Security Code	
Cardholder N	Name		
Billing Addre	ess of Cardholder		
City, State, Z	ip, Country		
Signature _			

# **TOTAL ENCLOSED**

Total payment for both sides of registration form. Conference Registration and NCDA Membership.



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