

Registration Form

Complete one form per person



NATIONAL COALITION *for* HOMELESS VETERANS

2010 Annual Conference & Membership Meeting

Please type or print all sections of the conference registration form and mail or fax to:
NCHV, 333 1/2 Pennsylvania Ave., SE, Washington, D.C. 20003; Fax: 202-546-2063; (toll-free 888-233-8582)

CONTACT INFORMATION

FIRST AND LAST NAME (AS IT WILL APPEAR ON YOUR NAME BADGE)

ORGANIZATION

ADDRESS

CITY STATE ZIP

PHONE FAX

EMAIL

Are you a NCHV Member? Yes No

Would you like to become a member today? Yes No

REGISTRATION FEES

JUNE 21-23, 2010

CONFERENCE FEE Member.....\$395
 Non-Member.....\$475

ONE-DAY ONLY Member.....\$220
 Non-Member.....\$250

CHECK ONE: Monday Tuesday Wednesday

Registration forms received after May 14 will be charged a \$35 late fee.

PAYMENT

REFUND POLICY: A full refund will be made for cancellations if received by April 15, 2010. A 50% refund will be made for cancellations received between April 15-May 14, 2010. No refunds will be made after May 15, 2010.

CONFERENCE REGISTRATION FEES \$ _____

ONE-DAY ONLY FEES \$ _____

MEMBERSHIP DUES \$ _____

TOTAL: \$ _____

PAYMENT METHOD: VISA MasterCard Amex

_____/_____/_____/_____/_____/_____
CREDIT CARD # EXP. DATE

CARDHOLDER NAME

BILLING ADDRESS

CITY STATE ZIP

BILLING PHONE NUMBER

ADDITIONAL INFORMATION

Is this your first NCHV Conference? Yes No

Type of organization: Community-Based
 Faith-Based
 Federal
 State/Local Government Agency
 Other _____