

Registration Form

Complete one form per person



NATIONAL COALITION *for* HOMELESS VETERANS

2015 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

MAY 27 - 29, 2015

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

SPEAKER/FACULTY CONFERENCE FEE Member.....\$195
 Non-Member.....\$275

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

CHECK ONE: Wednesday Thursday Friday

Registration forms received after May 8 will be charged a \$35 late fee.

PAYMENT

REFUND POLICY: A full refund will be made for cancellations if received by April 10, 2015. A 50% refund will be made for cancellations received between April 11 - May 1, 2015. No refunds will be made after May 1, 2015.

CONFERENCE REGISTRATION FEES \$ _____

ONE-DAY ONLY FEES \$ _____

MEMBERSHIP DUES \$ _____

TOTAL: \$ _____

PAYMENT METHOD: VISA MasterCard Amex

CREDIT CARD # _____ / _____ SECURITY CODE _____

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
 Fed/State/Local Government Agency
 Other _____