



CONVENTION 2010 REGISTRATION FORM

REGISTRANT INFORMATION

Name _____
Badge Name (Nickname) _____
Address _____
City, State Zip _____
Phone _____
Fax _____
E-mail _____

Special Information (check all applicable)

- I am a first-time convention attendee
I am an ADPAC member
I am a Component President
I am a FDHE board member
I am accepting a Member Project Award
I am accepting a Neff Award
I have dietary/accessibility needs:
I need a roommate. I arrive on _____

Registration/House of Delegates
Credential Category (CHECK ONLY ONE)

- AADA Board of Directors
AADA Advisory Council
AADA Past President
Constituent President
Delegate
Alternate
AADA Member or Special Guest

EVENT TICKETS

You must register for events even if there is no charge.

Table with 5 columns: Date, Event, Cost Per Person, # Tickets, Total. Rows include Neff Awards Luncheon, ADPAC/Member Project Awards Breakfast, and Presidential Reception.

PAYMENT

Check (payable to AADA) MasterCard Visa Account Number
Expiration Date / Verification Code last 3 digits on reverse side of card
(\$15.00 fee will be charged for credit card cancellations)

Registration Deadline: September 10, 2010

(A \$25.00 late fee will be charged for registrations received after this date and for all on-site registrations.)

Mail to: AADA, 211 E Chicago Ave, Suite 730, Chicago, IL 60611
If paying by credit card, you may fax this form to (312) 440-2587