

# 2019 NAST LEGISLATIVE CONFERENCE: REGISTRATION FORM

Register online at [www.nast.org](http://www.nast.org), mail or overnight registration and payment to NAST, 449 Lewis Hargett Circle, Suite 290, Lexington, KY 40503, or fax form to: (859) 278-0507. Questions or concerns may be directed to Kathleen Young at (859) 276-1193 or [kyoung@nasact.org](mailto:kyoung@nasact.org)  
**NOTE:** A \$100 processing fee will be charged on all cancellations made through January 25, 2019. No refunds will be granted for cancellations made after January 25, 2019. One substitute is permitted per cancellation.

<input type="checkbox"/> <b>Register – Conference (February 10-12)</b>	<b>Early Bird</b> <i>Nov 5 – Jan 7</i>	<b>Regular</b> <i>Jan 8 – Feb 1</i>	<b>By Phone &amp; Onsite</b> <b>(online registration closed)</b> <i>Feb 2 – 10</i>
<input type="checkbox"/> State Treasurer, Treasury Staff & Network Member	\$630	\$780	\$880
<input type="checkbox"/> Other Government Officials	\$893	\$1,043	\$1,143
<input type="checkbox"/> Non-Profit Representatives	\$893	\$1,043	\$1,143
<input type="checkbox"/> Corporate Affiliates ( <i>Membership dues must be current</i> )	\$1,420	\$1,570	\$1,670
<input type="checkbox"/> Private Sector (non-members)	\$2,840	\$2,990	\$3,090

Name: \_\_\_\_\_  **First-time attendee?**  
 Title: \_\_\_\_\_  
 Agency/Firm: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 Please describe any special dietary or other accommodations needed: \_\_\_\_\_  
 \_\_\_\_\_

**Register – Guest**

- Public Sector Guests (non-business)..... \$ 315
- Private Sector Guests (non-business)..... \$ 420

Guest Name (non-business): \_\_\_\_\_

**Your Arrival Date:** \_\_\_\_\_ **Your Departure Date:** \_\_\_\_\_

<b>Please indicate attendance:</b>	<b>You</b>	<b>Your Guest</b> (if applicable)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Opening Reception, Feb 10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conference Breakfast, Feb 11
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conference Lunch, Feb 11
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dinner at Mansion on O Street, Feb 11
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conference Breakfast, Feb 12
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boxed Lunch, Feb 12

**Payment in full must be received with registration.**

- Enclosed is a check payable to NAST
  - Charge to:
    - American Express
    - MasterCard
    - Visa
- Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
 CVV Code: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Electronic payment may be made to: Fifth Third Bank, 38 Fountain Square Plaza, MD10908d, Cincinnati, OH 45263