

2025 NAST TREASURY MANAGEMENT TRAINING SYMPOSIUM: JUNE 2-5

Register online at www.nast.org, mail 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. **NOTE:** A \$100 processing fee will be charged on all cancellations made through May 19, 2025. No refunds will be granted for cancellations made after May 19, 2025.

	Early Bird Mar 25 – Apr 21	Regular Apr 22 – May 19	By Phone & Onsite (online reg closed) May 20 – Jun 5
<input type="checkbox"/> Register – Conference (June 2-5)			
<input type="checkbox"/> Treasurer/Treasury Staff/Network Member	\$760	\$910	\$1,010
<input type="checkbox"/> Other Government Officials & Non-Profit Reps	\$1,070	\$1,220	\$1,320
<input type="checkbox"/> Corporate Affiliates (<i>Membership dues must be current</i>)	\$1,690	\$1,840	\$1,940
<input type="checkbox"/> Corporate (non-members)	\$3,380	\$3,530	\$3,630

Name: _____ ☐ **First-time attendee?**

Title: _____

Agency/Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Please describe any special dietary or other accommodations needed: _____

☐ **Register – Guest**

☐ Attendance at full conference (all meals): \$ 550 ☐ All evening events: \$400

☐ Monday evening: \$ 100 ☐ Tuesday evening: \$150 ☐ Wednesday evening: \$150

Guest Name (family/non-business): _____

Your Arrival Date: _____

Your Departure Date: _____

Please indicate attendance:

You **Guest** (if applicable)

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Breakfast, Jun 2 |
| <input type="checkbox"/> | <input type="checkbox"/> | Lunch, Jun 2 |
| <input type="checkbox"/> | <input type="checkbox"/> | Welcome Reception, Jun 2 |
| <input type="checkbox"/> | <input type="checkbox"/> | Young Professionals Reception
(Under 40), Jun 2 |
| <input type="checkbox"/> | <input type="checkbox"/> | Breakfast, Jun 3 |
| <input type="checkbox"/> | <input type="checkbox"/> | Lunch, Jun 3 |

You **Guest** (if applicable)

- | | | |
|--------------------------|--------------------------|-------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Aquarium, Jun 3 |
| <input type="checkbox"/> | <input type="checkbox"/> | Breakfast, Jun 4 |
| <input type="checkbox"/> | <input type="checkbox"/> | Lunch, Jun 4 |
| <input type="checkbox"/> | <input type="checkbox"/> | Power Plant Live, Jun 4 |
| <input type="checkbox"/> | <input type="checkbox"/> | Breakfast, Jun 5 |
| <input type="checkbox"/> | <input type="checkbox"/> | Lunch, Jun 5 |

Tracks you plan to attend (check all that apply):

- | | |
|--------------------------|--------------------------------------|
| <input type="checkbox"/> | ABLE Savings Plans |
| <input type="checkbox"/> | Banking & Cash Management |
| <input type="checkbox"/> | 529 College Savings Plans |
| <input type="checkbox"/> | Financial Education |
| <input type="checkbox"/> | Innovations & Trends in the Treasury |
| <input type="checkbox"/> | Retirement Security |
| <input type="checkbox"/> | State Debt Issuance |
| <input type="checkbox"/> | Technology in the Treasury |
| <input type="checkbox"/> | Unclaimed Property |

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: _____

If you need updated ACH payment information please contact Lori at lsagle@nasact.org.