PRESENTER REGISTRATION



REGISTRATION FORM (PLEASE PRINT CLEARLY)

NAME (as it should appear on name badge)					
JOB TITLE - (REQUIRED PLEASE)					
ORGANIZATION/SCHOOL DISTRICT					
ATTENDEE EMAIL (REQUIRED FOR CONFIRMATION)					
WORK ADDRESS					
CITY		STATEZI	P		
WORK PHONE ()					
. Is this your first time attending: ☐ Yes ☐ No 2. Will you be attending the Awards Brunch: ☐ Yes ☐ No					
3. I am a (Please Check One): ☐ Professional Member ☐ S	tudent Member 🚨 Retir	ree Member 👊 Non-Me	ember		
4. Role: ☐ Elementary School Counselor ☐ Middle School ☐ Grad Student ☐ Other		ool Counselor 🚨 Post-Se	econdary School Counselor Educator		
5. How long have you currently worked as a Certified Professional School Counselor? N/A up to 3 years 4-8 years 9-15 years 15+ years					
6. Conference T-Shirt Size (Add \$15 to D below): ☐ S ☐ M		XL (Register by Aug 28 t	o Recieve a T-shirt)		
A. Main Conference					
Attend both days (Sept. 12-13)	Presenter		BECOME A KSCA MEMBER		
☐ Early Register (by July 31, 2024)*	\$150 per person		OR RENEW MEMBERSHIP		
☐ Regular Registration (August 1, 2024 - Sept. 8, 2024)☐ Final Registration (after September 8, 2024)	\$165 per person \$190 per person		FOR \$25!"		
B. Pre-Conference Learning Session (Sept. 11) Please choose one.	Professional/Affiliate	Graduate Student/ Retiree/Emeritus	Main Conference (A) \$		
☐ Counseling All Three Domains within MTSS – Bushelman			Pre-Conference (B) \$		
☐ K-12 Behavior Management at all Three Tiers – Crabtree/Lindsey	\$50 per person	\$40 per person	Add Membership \$25 (C) \$		
How SEL can Empower School Counselors – Roeser			Add Conf T-shirt \$15 (D) \$		
* To qualify for the Early Registration Rate, your registration form <u>AND</u> payment (copy of your purchase order, check, or					
credit card) must be received or postmarked by the Early Registra	ation cuton date.		Total Due (A+B+C+D)\$		

REGISTRATIONS CANNOT BE PROCESSED WITHOUT PAYMENT. PLEASE SEND PAYMENT AND REGISTRATION FORM(S) TOGETHER.

How and Where Do I Pay?

WEBSITE EMAIL FAX PHONE MAIL CREDIT CARD V V V CHECK

WEBSITE: www.ncyionline.org/ky-sca-presenters

EMAIL: registrations@ncyi.org

FAX: 423-899-4547 **PHONE:** 866-318-6294

MAIL: National Center for Youth Issues

P.O. Box 22185

Chattanooga, TN 37422-2185

Please make your check or purchase order payable to: **National Center for Youth Issues**.

A W-9 is available on the website.

PLEASE NOTE: The attendee will receive a confirmation to the email address provided when their registration is processed (make sure to check Junk/Spam folders). Please allow ample time for processing.

PAYMENT METHOD

(PAYABLE TO NATIONAL CENTER	THE PURCHASE ORDER IS REQUIRED. R FOR YOUTH ISSUES, P.O. BOX 22185, CHATTANOOGA, T	N 37422-2185)
☐ CHECK ENCLOSED (MADE PAYA	BLE TO NATIONAL CENTER FOR YOUTH ISSUES)	
☐ CREDIT CARD ☐ PERSONAL	☐ CORPORATE	
CARD NO	EXP. DATE	CID#
NAME ON CARD (PLEASE PRINT)		
CREDIT CARD BILLING ADDRESS		
CITY	STATEZIP	
AUTHORIZED SIGNATURE	EMAIL	

CANCELLATION POLICY: If we are forced to cancel the KSCA Conference because of a "force majeure" event, such as a government restriction on large gatherings that cover the intended size of the conference, then we will issue full refunds of the registrations. Otherwise, our normal cancellation policy will be upheld: There will be no refunds after August 11, 2024. All cancellations before August 11, 2024 will be refunded less a \$25 handling fee. The conference is not responsible for and cannot give refunds due to problems beyond its control such as weather or school closings. The sponsors of the conference receive registrant contact information.

On social distancing and other health and safety measures, the regulations/guidelines that apply to hotels and conference centers may change. The KSCA Conference will conform to all necessary regulations/guidelines that are in place as of the date of the conference.