

## **Early Bird Registration**

May 13-15, 2024 Rosen Centre, Orlando, Florida



Please print all information clearly.						
First Name		Last Name		NNA Member Number		
Address		City		State/Country	Zip/Postal Code	
Phone Number		Email Address (required)				
Mobile number where we can reach you at the Conference		Is this your first NNA Conference? ☐ Yes ☐ No ☐ I am a U.S. military veteran: ☐ Yes ☐ No				
Would you like to receive a Certificate of Completion? ☐ Yes ☐ No		Do you require special accommodations under the ADA? (please specify)				
I will attend the following events:  □ Exclusive Networking Mixer (Mon 5/13)		☐ Gala Banquet (Wed 5/15), please choose Breakfast: ☐ Tues 5/14 entrée: ☐ Beef ☐ Chicken ☐ Vegetarian ☐ Wed 5/15				
Registration Types						
Full Conference Pass		Workshops & Exhibits Pass Guest Pass				
<ul><li>Workshops (Tue 5/14, Wed 5/15)</li><li>Keynote Address (Wed 5/15)</li><li>Workshop</li><li>Keynote Address (Wed 5/15)</li></ul>		ops (Tue 5/14 e Address (W	ps (Tue 5/14, Wed 5/15)  Address (Wed 5/15)  all (Mon 5/13, Tue 5/14, Wed 5/15)  - Exclusiv  - Cocktail  - Gala Bai  - Location		Breakfast Buffet (Tue 5/14, Wed 5/15) sive Networking Mixer (Mon 5/13) tail Reception (Wed 5/15) Banquet (Wed 5/15) tion Celebration Event (Wed 5/15) wass does not include access to hops or exhibit hall.	
Select Your Registration — Prices valid through	December 1, 2	023	Registration/Payment Inf	formation		
1. Full Conference Registration:			1. Full Conference Registration/W	orkshops & Exhibits Pas	s \$	
☐ Full Conference — Member (#1160)						
☐ Full Conference — Member Installment Plan (#1162)			2. Add-ons \$			
☐ Full Conference — Non-Member (#1161)\$			Total Due		\$	
2. Workshops & Exhibits Pass:						
<ul> <li>☐ Workshops &amp; Exhibits Pass — Member (#1165)</li></ul>			NationalNotary.org/ Conference NationalNotary	CALL 1-844-4NNA-CONF	MAIL National Notary Association 9350 De Soto Ave Chatsworth, CA 91311-2402	
		\$670				
3. Optional add-ons:  Guest Pass (#1169)\$475			☐ Check/Money Order (payable to National Notary Association — mail-in only)			
If purchasing a Guest Pass:			☐ Visa ☐ American Express ☐ MasterCard ☐ Discover			
Guest Name			Credit Card #			
Guest City	Guest Sta	ate	Expiration Date			
Guest will attend the following events:  Exclusive Networking Mixer (Mon 5/13)  Gala Banquet (Wed 5/15), please choose entrée: Beef Chicken Vegetarian			CVV Number (3 or 4 digits on back of card)			
			Name on Card			
Installment Plan Acknowledgment			Billing Address			
☐ I acknowledge and agree to the following:			City	State	Zip Code	
I acknowledge that \$330 (\$250 for Workshop & Exhibitor Pass) will be cha to my credit card upon receipt of this form.		arged		- Claire	2.5 0000	
I acknowledge that two (2) additional payments of \$200 (\$175 for Workshop & Exhibitor Pass) will be charged on the 15th day of each following month until total amount of \$730 (\$600 for Workshop & Exhibitor Pass) due on my accourse paid in full.		ntil the	You will receive registration confirmation by email.			
<ul> <li>is paid in full.</li> <li>I acknowledge that I am responsible for having sufficie account at the time installments are due.</li> </ul>	nt funds in the pay	ment	Registration does not include travel of	or accommodations.		
Signature Date						

## REFUND AND CANCELLATION POLICY

Submit cancellation and refund requests in writing to Conference@NationalNotary. org. Cancellations received by Wednesday, March 13, 2024 are fully refundable. Cancellations received March 14 through April 12, 2024, will be refunded **75% of the purchase amount.** Cancellations after April 12, 2024 are nonrefundable.

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Note: NNA® Conference program information subject to change.