

# REGISTRATION FORM

## **NYSPHADA CONFERENCE Wednesday - Thursday April 4 & 5, 2012**

Housing Authority
Badge Name & Title
Badge Name & Title
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Badge Name & Title
I wish to make a donation to the Scholarship Fund in the amount of \$_____.
Enclose payment with registration.

### **REGISTRATION INFORMATION:**

- This is a HUD-approved expense
- One and one-half day program
- Registration fee for delegates includes; conference material, attendance to all sessions, continental breakfast both days and lunch.
- Registration is strongly recommended. Cancellations received before March 18 entitles registrant to a full refund. Cancellations after that date are subject to a 25% administrative fee.
- No shows will be billed full conference fee.

### **REGISTRATION FEES:**

(Please mark the appropriate one)

Indicate number of attendees

_____ NYSPHADA Member.....	\$ 225.00
_____ Non-Member .....	\$ 300.00
_____ Spouse/Guest .....	\$ 60.00
_____ HUD/NYS-HCR .....	\$ 25.00

Make checks payable to: NYSPHADA

Enclosed Payment: \$ \_\_\_\_\_

Payment must accompany registration.

### **MAIL REGISTRATION AND PAYMENT TO:**

**NYSPHADA**

**Attn: Sandra Thurston**

**P.O. BOX 205**

**Lockport, NY 14095**