Conference Registration Form
NAFSA Region X Fall 2004 Conference
Garden City, New York
November 7-9, 2004

Please type or print and mail or FAX with check or credit card payment or register online.

Last Name: ____________________________  First Name: ____________________________
Institution/Organization: ________________________________________________________
Mailing Address: ________________________________________________________________
Daytime Phone: ________________________  Fax: ________________________________
Email Address: _________________________________________________________________

Are you a member of NAFSA?  _____ Yes: NAFSA MEMBERSHIP #: ________ (required)
(If you do not know your membership #, please contact NAFSA at 202-737-3699, ext. 0)
_____ No
_____ Not a current member but am joining now at half-price

Is this your first NAFSA conference?  _____ Yes  _____ No
Is this your first Region X conference?  _____ Yes  _____ No

Please indicate your primary NAFSA Sectional Interest (please check one)
_____ ADSEC  _____ ATESL  _____ CAFSS  _____ COMSEC  _____ SECUSSA  _____ Two Year College

Please specify if you have special dietary, mobility or other needs: __________________________

Conference Registration (please circle)

<table>
<thead>
<tr>
<th>Registration Type</th>
<th>Postmarked by 9/24</th>
<th>after 9/24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Conference (NAFSA MEMBER)</td>
<td>$175</td>
<td>$200</td>
</tr>
<tr>
<td>Full Conference (Non-Member)</td>
<td>$205</td>
<td>$230</td>
</tr>
<tr>
<td>Full-time Student*/COMSEC Volunteer</td>
<td>$115</td>
<td>$115</td>
</tr>
<tr>
<td>*(Proof of full-time registration must accompany this form)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>One Day Registration (Circle date: 11/8 or 11/9)</td>
<td>$110</td>
<td>$115</td>
</tr>
</tbody>
</table>

Total Conference Registration Fee: $ ________________

Pre-Conference Workshop Registration (please circle)

<table>
<thead>
<tr>
<th>Workshop</th>
<th>NAFSA Member</th>
<th>NAFSA Nonmember</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filing Academic H1-B Petitions</td>
<td>$175*</td>
<td>$320*</td>
</tr>
<tr>
<td>F-1 Regulations for Beginners</td>
<td>$175*</td>
<td>$320*</td>
</tr>
<tr>
<td>Crisis in ESL Today</td>
<td>$70</td>
<td>$95</td>
</tr>
<tr>
<td>Foreign Credential Evaluation for Study Abroad</td>
<td>$70</td>
<td>$95</td>
</tr>
</tbody>
</table>

*The actual cost of the PDP workshops is $200 for members and $345 for nonmembers. Region X is subsidizing the workshops to offer them at a reduced rate.

Total Pre-Conference Workshop Registration $ ________________
Guest Tickets for Conference Events
The events below are included in your registration fee. You will receive a ticket for these events. If you plan to bring a non-registered guest, you must purchase a guest ticket. Please indicate how many additional tickets at the price indicated you need to purchase.

Sunday Evening Exhibit Opening and Reception (___ @$15)  Total: ________________
Monday Plenary Lunch (___ @$30)  Total: ________________
Tuesday Recognition Lunch (___ @$30)  Total: ________________

Total Guest Tickets  $ ________________

Special Activities
The following activities are not included in your registration fee. If you are interested in participating, you must pre-register and purchase a ticket. You may purchase additional tickets for guests.

Sunday Trip to John F. Kennedy Airport (___ @$15)  Total: ________________

Date of birth: ________________________________ (mm/dd/yy)

Monday Evening at a Broadway Play (___ @$80)  Total: ________________

Total Special Activities  $ ________________

NAFSA Membership Dues
Regular Membership $148
Associate Membership (Retired, Student, $98
Community Volunteer, Overseas Advisor)  $50
Overseas Airmail Fee (outside US, Canada, Mexico) $50

NAFSA Membership Dues  $ ________________

TOTAL PAYMENT ENCLOSED  $ ________________

PAYMENT OPTIONS:  NAFSA Taxpayer ID # is 13-1878953
_____ Check enclosed for all fees payable to NAFSA Region X. All institutional checks must include registrant’s name.

_____ Credit Card:  Please indicate:
_____ Visa  _____ Mastercard  _____ American Express
Card #: ___________________ Expiration Date: ____________
Name as it appears on card: ______________________________
Signature: __________________________________________

• Mail completed registration form and payment to: NAFSA Region X Conference, 411 Lafayette Street, Suite 201, New York, New York 10003 (must be posted no later than 9/24/04)
• FAX completed registration form with credit info to 212-460-5460 (must be received no later than 9/24/04)
• Register on-line using a credit card on the Region X website at: http://www.region10.nafsa.org/

Confirmations of registration will be sent indicating what you are registered for and the amount received. Confirmations will also serve as a receipt.