

***Required Fields**

Please type or print legibly. You can type into the form.

I. Registrant Information

*Prefix _____ *First Name _____ *Last Name _____ Suffix _____
 Organization _____ Title _____
 *Address Line 1 _____ Address Line 2 _____
 *City _____ *State _____ *Zip _____ Country _____
 *Phone _____ Fax _____ *E-mail _____

II. Profile Information

1. ***Are you a FIRST-TIME Mid-Year attendee?** Yes No

2. ***Tell Us About Yourself** (check ALL that apply)
 DFC Grantee:
 Year Awarded _____ (e.g., 2009)
 Grantee # _____
 DFC Mentoring Grantee
 Weed & Seed Site
 Graduated Weed & Seed Site
 SPF SIG Subrecipient
 STOP Act Grantee
 SSA or NPN

3. ***Area of Employment** (check ONE)
 Business Media
 Civic / Volunteer Org. Military
 Coalition Private Citizen
 Government Agency Religious / Faith Org.
 Human Services School / Education
 Law Enforcement Youth
 Other Substance Abuse Prevention/Treatment Organization

4. ***Level of Employment** (check ONE)
 Director
 Staff
 Volunteer
 Other (please specify) _____

5. ***Primary Geographic Target Area** (check ONE)
 Frontier
 Rural
 Suburban
 Urban
 N/A

6. Dietary Restrictions:

 Physical Disability Requirements:

7. Emergency Contact Name & Phone:

*** III. Registration Fee**

<u>Regular Rates</u> (Until July 15)	<u>Onsite Rates</u> (After July 15)
<input type="checkbox"/> Adult Member Regular: \$610	<input type="checkbox"/> Adult Member Onsite: \$660
<input type="checkbox"/> Adult Non-member Regular: \$810	<input type="checkbox"/> Adult Non-member Onsite: \$860
<input type="checkbox"/> NYLI Youth Regular: \$395	<input type="checkbox"/> NYLI Youth Onsite: \$445
<input type="checkbox"/> Guest/Spouse Regular: \$225	<input type="checkbox"/> Guest/Spouse Onsite: \$250

Groups: Groups of 6 or more may receive additional discounts on the early-bird and regular rates. In order to be eligible for these discounts, your group must meet ALL of these requirements: (1) all individuals must be associated with the SAME organization, (2) all individuals must be CADCA members, and (3) your group must contain a minimum of 6 PAYING individuals. If you meet ALL of these requirements, please complete the GROUP Registration Form which is available online at www.cadca.org/midyear.

IV. CADCA Membership

Not a CADCA member? Why pay higher registration fees? Purchase a one-year membership and the reduced Mid-Year member rate for potentially the same or lower price! Select your member type below to become a CADCA member, and be eligible for member registration rates to the Mid-Year and other CADCA events.

- Individual Professional: \$50
- Coalition/Community-based Organization (based on annual budget; check one box below)
 - Budget: \$99K & below: \$200
 - Budget: \$100K - \$299K: \$300
 - Budget: \$300K - \$499K: \$400
 - Budget: \$500K+: \$500
- Special Interest Group (Local Gov't / Prevention & Treatment Centers, etc.): \$500



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V. Payment Information

*Registration: \$ _____ + Guest Registration: \$ _____ + Membership: \$ _____ = *Total Amount: \$ _____

Check Enclosed (payable to CADCA) Check # _____

Credit Card (check one) VISA MasterCard American Express # _____

Cardholder's Name _____ Exp. Date _____ CVV Code _____

Billing Address (if different than Section I) _____

I, the undersigned, authorize CADCA to charge my credit card for the "Total Amount" listed on this Registration Form.

Cardholder's Signature _____ Date _____

A completed registration form is required for each attendee. CADCA will not process registration forms that do not include payment information.

Purchase Orders: Purchase orders are not considered payment. Invoices will be sent for purchase orders received. However, registrations with purchase orders will not be processed until payment is received.

Payment Change: Once payment is received, any change to the payment method (such as change in credit card numbers) will be treated as a cancellation and subject to a \$75 administrative fee (per person). Re-registration will be charged at the current rates.

VI. Submission Methods

E-MAIL: events@cadca.org

FAX: 703-706-0573

MAIL: CADCA, 625 Slaters Lane, Suite 300 • Alexandria, VA 22314 • Attn: 2010 Mid-Year

For faxed or mailed registration forms, you will receive an e-mail confirmation from CADCA within 10 business days.

VII. Cancellation Policy

All requests for registration cancellations must be submitted in writing via e-mail to events@cadca.org or via fax to 703-706-0573 by July 15, 2010. Cancellation requests that are received by July 15 will be processed less a \$75 administrative fee. Refunds will be processed within 45 days after the meeting. There will be no refunds after July 15 and no refunds for no-shows. By submitting this registration form, you have agreed to this cancellation policy.