



**ALL FIELDS MANDATORY: PLEASE PRINT LEGIBLY PRESENTER Registration Form**

**I. REGISTRANT INFORMATION**

**TRAINING SESSION TITLE:** \_\_\_\_\_

**Presenter #2: Name** \_\_\_\_\_

**Organization** \_\_\_\_\_ **Current CADCA Membership ID#** \_\_\_\_\_

**Title** \_\_\_\_\_ **Primary Phone#** \_\_\_\_\_

**Address Line 1** \_\_\_\_\_ **Address Line 2** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Country** \_\_\_\_\_

**Attendee E-mail** \_\_\_\_\_

*(needed for receipt, confirmation, and platform access in July)*

**Every individual attendee MUST have their own unique email address for platform login.**  
Duplicate emails will not work.

**CHECK ONLY ONE: (all fees listed in Section III)**

- Adult General Attendee
- Adult Advisor Attendee (For Youth Leadership Initiative)
- Youth Leadership Initiative Attendee

**Is this your FIRST-TIME attending CADCA's Mid-Year Training Institute?**

- YES  NO

**II. ADDITIONAL PRESENTERS**

**Presenter #3 Name** \_\_\_\_\_

**Organization** \_\_\_\_\_

**Title** \_\_\_\_\_ **Attendee E-mail** \_\_\_\_\_

**CHECK ONLY ONE:**

- Adult General Attendee
- Adult Advisor Attendee
- Youth Leadership Initiative Attendee

**Is this your FIRST-TIME attending CADCA's Mid-Year Training Institute?**

- YES  NO

**Presenter #4 Name** \_\_\_\_\_

**Organization** \_\_\_\_\_

**Title** \_\_\_\_\_ **Attendee E-mail** \_\_\_\_\_

**CHECK ONLY ONE:**

- Adult General Attendee
- Adult Advisor Attendee
- Youth Leadership Initiative Attendee

**Is this your FIRST-TIME attending CADCA's Mid-Year Training Institute?**

- YES  NO

**Presenter #5 Name** \_\_\_\_\_

**Organization** \_\_\_\_\_

**Title** \_\_\_\_\_ **Attendee E-mail** \_\_\_\_\_

**CHECK ONLY ONE:**

- Adult General Attendee
- Adult Advisor Attendee
- Youth Leadership Initiative Attendee

**Is this your FIRST-TIME attending CADCA's Mid-Year Training Institute?**

- YES  NO

### III. REGISTRATION RATES

NOTE: Different registration fee apply as noted	Early Rates (Until June 7)	Regular Rates (Jun. 8-Jul. 15)
Presenter #2	\$300	
Presenter #3	\$300	
Presenter #4	\$300	
Presenter #5	\$475 (member) or \$675 (non-mbr)	\$525 (member) or \$725 (non-mbr)
Confirm with your fellow presenters who is registering under which fee. All forms must be accompanied with payment.		

### IV. CADCA MEMBERSHIP – \*NEW AND REINSTATING MEMBERS ONLY

**\*CADCA Membership must be active through July 15, 2021 BEFORE you register to get the Member Rate\***

Please contact [membership@cadca.org](mailto:membership@cadca.org) for any further questions

**Not a CADCA member?** Purchase a one-year membership and get the reduced member rate! Select your member type below to be eligible for discounted member rates to the Forum and Mid-Year (Membership fees subject to change)

- 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 Government/Prevention & Treatment Centers, etc.): \$500**
- Sustaining Member (State Government/National Organization): \$2,500**
- Prevention Professional: \$200**

### V. REGISTRATION SELECTION AND PAYMENT INFORMATION

Individual Registration: \$ \_\_\_\_\_

Membership: \$ \_\_\_\_\_

**Total Amount Due:** \$ \_\_\_\_\_

Check Enclosed (payable to CADCA) Check # \_\_\_\_\_

Credit Card (check one)       VISA       MasterCard       American Express

**Card Number** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **CVV Code:** \_\_\_\_\_

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

**Cardholder's Name** \_\_\_\_\_

**Cardholder's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**CADCA will not process registration forms that do not include payment information (for presenter #2 and #3).** You are not considered registered for the conference until either payment or a purchase order has been received. ***Payment must be postmarked by July 5, 2021 before gaining access to the virtual training event.***

**Purchase Orders:** Official Purchase Orders (PO) are accepted (not Purchase Requisitions) provided the following guidelines are met. Upon receipt of a completed registration form, CADCA will email an invoice from which you should submit payment. ***If you submit a PO to CADCA, you are guaranteeing payment for the full amount of the PO by July 5th.***

**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 \$95 administrative fee (per person).

## VI. SUBMISSION METHODS

E-mail this form to [events@cadca.org](mailto:events@cadca.org) and/or mail this form and check to: **CADCA, 625 Slaters Lane, #300, Alexandria, VA 22314**. For mailed or emailed registration forms, you will receive an e-mail confirmation of the completed registration within 7 business days. If you are planning to expedite your submission/payment using mailing services other than USPS please call/email our office before sending.

## VII. CANCELLATION & SUBSTITUTION POLICY

All requests for ***registration cancellations*** must be submitted in writing by July 5, 2021 via e-mail to [events@cadca.org](mailto:events@cadca.org). Cancellation requests received by this date will be processed **less a \$95 administrative fee (per person)**. Refunds will be processed within 45 days after the meeting. There will be **NO REFUNDS after July 5th**.

All requests for ***registration substitutions*** must be submitted in writing via e-mail to [events@cadca.org](mailto:events@cadca.org) along with a new and completed registration form. Substitution requests are free of charge.

**By submitting this registration form, you agree to this policy.**