

# NACWA REGISTRATION FORM

2009 WINTER CONFERENCE • FEBRUARY 3-6, 2009

## Controlling Chaos: Managing Capital Costs in an Uncertain Economic Environment

Westin Buckhead Atlanta • Atlanta, Georgia

Please print neatly or type

NAME

FIRST NAME/NICKNAME (AS YOU WOULD LIKE IT TO APPEAR ON YOUR BADGE)

TITLE

ORGANIZATION

ADDRESS

CITY

STATE

ZIP

PHONE

FAX

E-MAIL ADDRESS (FOR CONFIRMATION)

SPOUSE/GUEST NAME (if attending)

- ☐ Please check here if you require special accommodations to fully participate in the conference. Please attach a written description of your needs.

### REGISTRATION FEES

- |  |       |
|--|-------|
| <input type="checkbox"/> Member (Public Treatment Agency)                        | \$825 |
| <input type="checkbox"/> Public Affiliate (Conveyance Utility)                   | \$825 |
| <input type="checkbox"/> Non-Member (Public Agency)                              | \$825 |
| <input type="checkbox"/> Supporting Affiliate<br>(Academic, Non-Profit Entities) | \$825 |
| <input type="checkbox"/> Affiliate Member (Corporate or Legal)                   | \$925 |
| <input type="checkbox"/> Non-Member Private (Private)                            | \$975 |

Total Registration Fee(s) Enclosed: \$ \_\_\_\_\_

### PAYMENT OPTIONS

Payment by check, approved purchase order or credit card must be received by NACWA in order for your registration to be processed. Checks should be made payable to NACWA.

☐ VISA      ☐ AMEX      ☐ MC      ☐ DISCOVER

CREDIT CARD NUMBER

EXPIRATION DATE

SIGNATURE

### Submit Your Registration & Payment 3 Easy Ways!

ONLINE — [www.nacwa.org/meetings](http://www.nacwa.org/meetings)

FAX — 202.833.4657

MAIL — NACWA, Box P.O. Box 651211  
Potomac Falls, VA 20165-9174

*This form may be duplicated to accommodate multiple registrations from the same agency.*