



2013 NACSW Convention: Student Volunteer Application & Registration

Name: _____

Primary E-mail: _____ Alternate E-mail: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____

College/University that you attend: _____

Currently, I am a(n): Undergraduate student Master student Doctorate student

Are you the designated leader for your group? Yes No

If you answered "No" to the question above, please list your group leader: _____

Is this your first time attending a NACSW convention? Yes No

ACCOMMODATIONS

I'll be staying at the Sheraton Atlanta Hotel. I understand I need to make my own reservation.

Other

Preferred T-shirt size: Small Medium Large X Large XX Large

Volunteer Schedule Choices:

By marking 1, 2 or 3 on the lines, please list your 1st, 2nd, and 3rd choices for days to volunteer.

Thursday, October 17, 2013 (must be available between 7am and 10pm)

Friday, October 18, 2013 (must be available between 7am and 10pm)

Saturday, October 19, 2013 (must be available between 7am and 10pm)

Sunday, October 20, 2013 (must be available between 8am and 11am)

Do you have experience connecting LCD projectors to laptop computers? Yes No

Do you have experience using a video camera for recording people/events? Yes No

What day and time will you be arriving at the convention? _____

What day and time will you be leaving the convention? _____

Please add any additional comments about your availability here. Please include the day & time of your session if you are a workshop presenter. _____

PAYMENT

\$104 Non-member Rate (includes 6-month NACSW membership at no additional cost)

\$88 Member Rate (applies to current individual members of NACSW only)

****NOTE****Registration rate includes attendance to all convention workshop sessions, plenary sessions and banquet, but not pre-convention institute.

My check or money order is enclosed and made payable to: NACSW

OR

My credit card information is provided below. Please bill my credit card \$_____ convention registration.

Visa

MasterCard

American Express

Cardholder's Name _____

Card Number _____ Card Expiration Date _____ / _____

Billing Address _____

REFUND POLICY

Refunds, minus a \$25 processing fee, are available, if requested, until September 27, 2013. After this date refunds are not available.

STUDENT VOLUNTEER AGREEMENT

I would like to be a student volunteer at the NACSW Convention & Training Conference in Atlanta, GA to be held from October 17-20, 2013. I understand that in exchange for volunteering at the Convention up to 6 hours total, I will receive this discounted student volunteer registration rate to the Convention. *Pre-convention Institutes are not included in the student volunteer rate.*

Signature _____ Date _____

Please provide us with an emergency contact person while you are joining us at the convention.

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Please mail this form and your registration payment no later than September 27, 2013 to:

NACSW

P.O. Box 121

Botsford, CT 06404

If you have questions or concerns about your application, please contact the NACSW office at info@nacs.org or 203-270-8780.