

NAADAC Spring National Conference Information & Registration
(includes information for Early Bird Discount)
April 8-11, 2019 - Hilton Tampa Airport Westshore - Tampa, Florida

CONFERENCE and HOTEL INFORMATION

The conference is being held at the **Hilton Tampa Airport Westshore, 2225 North Lois Ave., Tampa, FL 33607**. Complimentary shuttle will be provided from/to Tampa International Airport. Hotel self-parking and guestroom Internet are complimentary. **Each participant is responsible for making their own lodging reservation.** The Association has negotiated a special conference rate from three days before/after the conference at a per room rate of \$134.00 per night, plus taxes (single/double) if reserved by **3/17/2019 AND** provided the room block has not been sold out. **To make lodging reservations call Hilton reservations at 800-445-8667, or the hotel at 813-877-6688; and mention you are attending the National Association of ADA Coordinators conference.**

All Participants Must Pre-Register -- NO Registrations Accepted at the Door

EARLY BIRD payment for full conference available if registration and payment **by credit card or check only** is received **no later than February 8, 2019. (No exceptions)**

CONFERENCE REGISTRATION

Rate includes hosted continental breakfast(s), breaks, & luncheon(s) for Mon thru Thurs.

Daily Only Rates

Conference Dates	ASSOCIATE	NON-ASSOCIATE
Mon. 4/8/19	[] \$595	[] \$695
Tue. 4/9/19	[] \$595	[] \$695
Wed. 4/10/19	[] \$595	[] \$695
Thur. 4/11/19	[] \$595	[] \$695

Rates for All Four Days of the Conference

ASSOCIATE - After 2/8/2019	[] \$2,290
<i>Early Bird by 2/8/2019</i>	<i>[] \$2,120</i>
NON-ASSOCIATE - After 2/8/2019	[] \$2,790
<i>Early Bird by 2/8/2018</i>	<i>[] \$2,620</i>

You must be either a current, up-to-date Associate or join to register at the Associate rate. If three or more participants from the same entity wish to register and pay in full at the same time, please call **888-679-7227** for special registration rates.

PARTICIPANT/ASSOCIATE INFORMATION

Name: _____ Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone:(_____) _____ FAX:(_____) _____ Email: _____

PLEASE CIRCLE the conference track of greatest interest to you:

Higher Education Employment Access (if not circled, ACCESS Track will be entered)

Please include any requests for accommodations on the basis of disability to participate in the conference with your registration:

The Association must know of accommodations required for training *no later than 3/6/2019*. (If a personal assistant attends the conference, the person must register, attend same conference workshop sessions as person requesting the accommodation, and pay \$350 per day to cover costs of food and materials.)

PAYMENT: CREDIT CARD or CHECK Visa/MasterCard Amex Check

Cardholder Name: _____ Card number: _____

Card Expiration: _____ Total Amount for Registration: \$ _____

(Credit cards processed for the Association by conference planner will show the words National Institute on Employment Issues - NIEI) -- (Federal Tax Number is 33-0595554, nonprofit 501(c)(3) corporation)

Signature (required): _____ Date Approved: _____ (WEB1218)

PAYMENT -- PURCHASE ORDERS ONLY: A copy of a fully *approved* purchase order by your organization *must be* received with registration form(s) **no later than 3/14/2019, and be accepted and invoiced by the National Association of ADA Coordinators** or space will not be reserved. Any P.O. must be paid within ten days after the conference or an additional charge of \$200 may be applied.

TO RESERVE YOUR SPACE, please **FAX** this completed registration form to: **(877) 480-7858**, Email PDF copy to **NIEIEMAIL@aol.com**, or mail registrations and make payments to: **National Association of ADA Coordinators, P.O. Box 958, Rancho Mirage, CA 92270.**

Regular registrations must be paid in full and received no later than March 21, 2019, or space/materials will be not reserved. For questions or other information, please call **888-679-7227** and leave message with your contact number and best time to contact you.

ANY CANCELLATION must be in writing to us no later than **03/22/2019 (no exceptions)** and is subject to a processing fee of \$600. Remaining balance, after processing fee is deducted for any cancellation on or after 3/22/2019, can only be applied to the Association's Fall 2019 or Spring 2020 conferences. **There are no refunds or credits for any no-shows on or after 3/28/2019 (No exceptions).**

May we list your email in the conference participant list for networking purposes? Please circle: **Yes** **No**

JOIN or RENEW YOUR ASSOCIATE STATUS

The Association offers many benefits including reduced rates for workshops/conferences, a bi-monthly newsletter, an annual Associates' Directory for networking purposes, and a lapel pin. To join, complete contact information, check appropriate associate box below and include your fee. ***If you join or renew and pay the first year dues at the time of registration, you can attend the conference at the Associate's rate.***

Individual Associate – \$195; Organization Associate – \$345

See our web site (www.adacoordinators.org) for updated information on the **Professional Associates (PA) Program: You must** include a completed copy of the PA application form found on the web site and include an additional one-time \$125 **application fee per application**, to become a participant in the Association's Professional Associate program.