

ATTENDEE REGISTRATION FORM

Please fax completed forms to: 443-561-2419 - For more information or questions, call 443-561-2418 or email lyons @ncsi.com

First Name or Nickname to appear on name badge Job Title/Position Co./Org. to appear on badge Employer Billing Address Employer City State Daytime Telephone Number SSN (full social is needed for clearance verification) Unclassified E-mail Address (for confirmation and receipt) Citizenship (U.S. citizenship is required to attend) Driver's License Number and State (for access to Wright-Patterson AFB) ADA/Special Requirements Do you have a NASIC badge? Yes No Do you have a CAC? Ves No								
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Technology(s)/Exhibitor(s) you'd like to see: Government Employee/Active Military/Academia \$299 Government Contractor/Industry \$399 The registration fee will cover the cost of attending the summit, morning/afternoon breaks and refreshments, access to the exhibit hall, summit materials, professional planning services, and event promotional materials. Substitution Policy: All cancellations must be received in writing no later than Wednesday, September 19, 2018, after which you will be held liable for 100% of the amount due. Cancellation/Substitution/No-Show: NO REFUNDS, NO EXCEPTIONS. To cancel your registration, email Rachel Lyons at Lyons@ncsi.com or fax 443-561-2419. Substitution Policy: All substitutions must be made via a Substitution form faxed no later than September 21, 2018. There will be no one day substitutions, only full conference substitutions. "SUBMISSION OF REGISTRATION FORM ACKNOWLEDGES THESE POLICIES"	UIRED	What day(s) will you be attending: 🗌 Monday 📄 Tuesday 🔛 Wednesday 📄 Thursday 📄 Friday						
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Lunch is not included with your registration fee, but has been arranged to accommodate all attendees. Transportation will be provided to the lunch facility each day. There is NOT an option for lunch at the NASIC building. Once lunch options are determined, registrants will be provided with a link to update their registration and provide lunch payment information.

LUNCH

	Credit Card - All credit card payments will be processed beginning Monday, \$	September 24, 2018. 🛛 American Expre	ss 🗌 MasterCard 🗌 Visa					
	Cardholder acknowledges this transaction in the amount shown above and agrees to perform the obligations set forth in the Cardholder's agreement with this issuer.							
5	Credit Card Number	Exp. Date	Security Code					
	Print Name on Card	Cardholder's Signature (Required)						
	Check enclosed - Mail completed registration form with check made payable to NCSI to: NCSI P.O. Box 64466, Baltimore, MD 21264-4466							

Please fax completed forms to: 443-561-2419 - For more information or questions, call 443-561-2418 or e-mail lyons @ncsi.com

Thank you for your registration. A confirmation will be e-mailed within 3-5 business days of submission.

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