SAVE TIME! REGISTER ONLINE AT WWW.NCSI.COM!

DoDIIS Worldwide
1-3 August 2016 – Atlanta, GA

ACADEMIA/OTHER GOVERNMENT ATTENDEE REGISTRATION FORM

*Please fax completed forms to: **443-561-2369** - For more information or questions, call 443-561-2368 or email taylor@ncsi.com*

ATTENDEE INFORMATION

Prefix or Rank (Dr., Ms., COL, etc.)	First Name	MI	Last Name
First Name or Nickname to appear on badge	Job Title/Position		
Co./Org. to appear on badge	Government Agency Employer	Grade/Rank (i.e. "GS 11, SES, E 8, 0 7")	
Preferred Mailing Address			
City	State	Postal Code	
Daytime Telephone	Fax	Cell Phone	
Unclassified E-mail Address (for confirmation and receipt)	Citizenship (US, UK, AUS, CAN, NZ citizenship is required to attend)		
ADA/Special Requirements			

REQUIRED

For planning purposes, please indicate which of the following functions that you plan to attend while at the DoDIIS Worldwide:

☐ Registration Mixer – Sunday, 31 July ☐ Opening Plenary Sessions - Monday, 1 August ☐ All Hands Networking Social - Monday, 1 August

How did you hear about the event: ☐ NCSI E-mail ☐ NCSI Website ☐ Colleague ☐ Commander/Supervisor ☐ Flyer/Poster/Banner ☐ Council/Association ☐ Social Media ☐ Online Calendar Posting ☐ Other _____

Technology(s)/Exhibitor(s) you'd like to see: _____

Please list any related associations and/or councils you belong to: _____

REGISTRATION TYPE

☐ **ACADEMIA** ☐ $249.00

☐ **OTHER GOVERNMENT** (Non Defense-Intel Mission Related/Five Eyes) ☐ $249.00

If you are a non-U.S. member of the Five Eyes, your registration will need to be approved in order to be validated. You will receive an email within 5 business days with your registration status.

Cancellation Policy: All cancellations must be received in writing no later than **13 July 2016** after which you will be held liable for 100% of the amount due. All sales after **13 July 2016** are final. NO REFUNDS, NO EXCEPTIONS.

Substitution Policy: All substitutions must be made via a Substitution form (available from taylor@ncsi.com). Substitution forms should be completed and faxed no later than **18 July 2016** or submitted on-site. There are no one day substitutions, only full conference substitutions.

****SUBMISSION OF REGISTRATION FORM ACKNOWLEDGES THESE POLICIES****

PAYMENT OPTIONS

❶ ☐ **Credit Card** - All credit card payments will be processed beginning **18 July 2016** ☐ **American Express** ☐ **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.

Credit Card Number	Exp. Date	Security Code
Print Name on Card	Cardholder's Signature (Required)	

❷ ☐ **Check enclosed** Mail completed registration form with check made payable to NCSI to: **NCSI P.O. Box 64466, Baltimore, MD 21264-4466**

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