Conference Registration Form

Housing Education Research Association Annual Meeting
October 28-31, 2012
Hotel Roanoke and Conference Center - Roanoke, Virginia

Please print or type—complete a separate form for each participant

Name

Title

Organization *Org.'s FID#

Mailing Address

City State Zip

Daytime Phone No. Fax No.

Email Signature

Registration Fee:

☐ $310 Member Registration ($360 after September 28)
☐ $410 Non-member Registration ($460 after September 28)
☐ $185 Student Registration ($210 after September 28)
☐ $190 Single Day Registration ($215 after September 28)
☐ $45 Half-day Registration for Wednesday, October 31 only ($50 after September 28)

Optional Fees:

☐ $45 Reception Guest Fee Sunday, October 28
☐ $45 Banquet Guest Fee Tuesday, October 30
☐ $95 Tour/trip to Monticello and Michie Tavern October 28
☐ $85 Membership Renewal

If you are attending a single day, which day will you attend? ____________________________________________

Do you require a vegetarian meal option? ☐ Yes ☐ No

Refund and Cancellation Policy
Requests for refunds will be honored when received seven calendar days prior to the program. However, another person may be substituted at any time for this program. A $60 administrative fee will be deducted for cancellations. In the unlikely event that this program is cancelled or postponed due to insufficient enrollments or unforeseen circumstances, the university will fully refund registration fees but cannot be held responsible for any other expenses, including cancellation or change charges assessed by airlines, hotels, travel agencies, or other organizations.

For weather or disaster-related program cancellation or postponement information, please call 540-231-9489.

Method of payment: Payment of registration fees is required prior to program attendance. Registration will be processed when payment is received.

☐ Check enclosed (Make payable to: Treasurer, Virginia Tech CE)
☐ Credit Card: ☐ Visa ☐ MC ☐ AmEx

(There will be a $50 processing fee for all returned checks.)

☐ Credit Card information will be processed by voice mail or email.

Cardholder name

Cardholder signature Date

Total: ______________________

Return with payment by October 19, 2012
(no staples, tape, or paper clips, please) to:

Conference Registrar
Continuing and Professional Education
Virginia Tech, Mail Code 0272
702 University City Blvd.
Blacksburg, VA 24061

phone: 540/231-5182
fax: 540/231-3306 (for credit card registrations only)

*Necessary to process a refund payable to any company, agency or government.

The information you provide is subject to the Freedom of Information Act guidelines.

Card No. Exp. Date

hera 564561 webpdf