

ABNS Fall 2020 Virtual Conference Registration
Signup online at www.nursingcertification.org/conference

Name: _____ Credentials: _____
Title: _____ Organization/Affiliation: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
Home Phone: _____ Work Phone: _____
Email (for confirmation and meeting update emails): _____
Emergency Contact (Name/Phone): _____
Dietary Restrictions: _____

#1: Conference Registration - Required (check only 1; see page 2 for additional attendees)

- 1 attendee \$400
- up to 3 attendees \$800
- up to 6 attendees \$1,600
- up to 9 attendees \$2,400
- up to 12 attendees \$3,200

#2: Sponsorship Opportunities - Optional

For sponsorship opportunities contact Robert Ranieri, ABNS at 205-795-7127 or email abns@nursingcertification.org. Check all that apply:

- Bronze Sponsorship \$500
- Silver Sponsorship \$750
- Gold Sponsorship \$1,000

#3: Total Amount Due (1 + 2): _____ \$

Method of Payment

Make check payable to ABNS, 3416 Primm Lane, Birmingham, AL 35216 or signup online.

Cancellation Policy

Refunds due to cancellation will be processed as follows:

- Through September 9: 90% of registration fees.
- Beginning September 10: No refund due to cancellation.

Attendee Contact Information

First/Last Name: _____
Role/Title: _____
Credentials: _____
Email: _____
Location (City, State/Province): _____

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