



NATIONAL ASSOCIATION OF FORENSIC COUNSELORS
2018 CONFERENCE REGISTRATION FORM



REGISTER ONLINE Questions? Contact us at 260-426-7234 or NAFC@ForensicCounselor.org . Visit our website for more conference information!

I AM ATTENDING:

All three days Only: ___ Mon. 10/2 ___ Tues. 10/3 ___ Wed. 10/4

ARE YOU AN NAFC MEMBER?

No Yes, NAFC Certification No.: _____

METHOD OF PAYMENT:

Check/Money Order enclosed P.O. #, must accompany registration
CC No: Exp. Date: Sec. Code:
Amount to Charge: Signature: Date:

PLEASE SEND PAYMENT TO:

MAIL: NAFC, PO Box 8827, Fort Wayne, IN 46898 FAX: 260-426-7431 E-MAIL: NAFC@ForensicCounselor.org
or REGISTER ONLINE

REGISTRATION INFORMATION

Name as you would like it to appear on CE certificate (NAFC reserves the right to limit the number of acronyms after a name for space)

Mailing Address City State ZIP

Contact Phone Number Profession, i.e., social work, probation/parole, etc. E-mail Address (required)

FULL CONFERENCE REGISTRATION FEES:

ONE DAY REGISTRATION FEES:

Table with 4 columns: Member Type, Fee Category, Fee Amount, and Day. Rows include NAFC Members and Non-Members for full and one-day fees.

Refund/Cancellation Policy

Written notification of registration cancellation must be received in writing by NAFC no later than August 30, 2018 in order to be considered for a refund. All written cancellation requests received by August 30, 2018 will be subject to a \$95.00 cancellation fee. No refunds will be given after August 30, 2018 for any reason.