

REGISTRATION RATE BREAKDOWN:

Check All That Apply		Early Bird Rate	Regular Rate (Increase after 7/14)
<input type="checkbox"/>	Member (FR)	\$219	\$254
<input type="checkbox"/>	Member 2 nd Reg* (FR)	\$184	\$219
<input type="checkbox"/>	Member 3 rd Reg* (FR)	\$149	\$184
<input type="checkbox"/>	Introductory Member (FR)	\$249	\$284
<input type="checkbox"/>	Introductory Member 2 nd Reg* (FR)	\$214	\$249
<input type="checkbox"/>	Introductory Member 3 rd Reg* (FR)	\$179	\$214
<input type="checkbox"/>	Non-Member (FR)	\$269	\$304
<input type="checkbox"/>	Non-Member 2 nd Reg* (FR)	\$234	\$269
<input type="checkbox"/>	Non-Member 3 rd Reg* (FR)	\$199	\$234
<input type="checkbox"/>	Student Member Registration (FR)	\$199	\$199
<input type="checkbox"/>	Saturday Only (SD)	\$169	\$209
<input type="checkbox"/>	Sunday Only (SD)	\$109	\$149
<input type="checkbox"/>	Banquet Ticket	\$69	\$69

Ticket Includes:

(FR) Full Registration tickets include Education, Meals, Banquet and Networking

(SD) Single Day Tickets include Education, Meals and Networking – Not the Banquet ticket.

*Group Registration

REGISTRATION FORM

ATTENDEE 1: REGISTRATION TYPE: _____

NAME: _____
 COMPANY: _____
 EMAIL: _____
 CELL PHONE: _____
 POSITION: _____
 DIETARY RESTRICTIONS: _____

ATTENDEE 2: REGISTRATION TYPE: _____

NAME: _____
 COMPANY: _____
 EMAIL: _____
 CELL PHONE: _____
 POSITION: _____
 DIETARY RESTRICTIONS: _____

ATTENDEE 3: REGISTRATION TYPE: _____

NAME: _____
 COMPANY: _____
 EMAIL: _____
 CELL PHONE: _____
 POSITION: _____
 DIETARY RESTRICTIONS: _____

ASCEF CORNHOLE TOURNAMENT

Attendee Name: _____
 Attendee Name: _____

CANCELLATION/REFUND POLICY:

ASCCA must be noticed of your cancellation in writing. If you cancel your registration on or before August 7, 2023 you will get a refund of your registration fee less a \$50 processing fee. If for any reason you cancel your registration after August 7, 2023, you will not receive a refund of any kind.

YES! I WOULD LIKE TO SPONSOR A STUDENT FOR \$199

STUDENT MEMBER REGISTRATION

I understand that I am responsible for providing proof of student status and the \$199 registration fee if I don't receive a registration sponsorship.

Payment Information:

Circle One:

MasterCard • VISA • Discover • American Express

Credit Card Number: _____

Exp Date: _____ Security Code: _____

Name on Card: _____

Billing Address: _____

City: _____

State: _____ Zip: _____

Signature: _____

Payment is due in full at the time of registration.

Contact:

Email completed forms, questions or concerns to Natalie Perry, ASCCA Events Manager at nperry@amgroup.us

One Capitol Mall, Suite 800
 Sacramento, CA 95814

info@ascca.com • www.ascca.com