



Annual Conference
August 31 - September 2, 2011, Chicago, IL

Please type or print

Organization Name: _____

Address: _____

City, State, Postal Code, Country: _____

Telephone: _____

Email Address: _____

Notes or Special Needs: _____

Please answer the following questions to assist us with tailoring session content to fit audience needs.

Version of Current Product: _____ Length of time running Q: _____

Has someone from your organization previously attended a NAUG Conference? Yes No

Attendee Information *(See reverse side for additional attendees and payment information)*

Name _____	Title _____
Badge Name _____	Email _____
Full Registration? <input type="checkbox"/>	One Day Registration? <input type="checkbox"/> Which Day? _____
Wednesday, August 31, 2011 – Pre-Conference Training: Please check session if attending.	
AM Session 8:00am – 12:00pm: <input type="checkbox"/> Address Administration	<input type="checkbox"/> Service Center
PM Session 1:00pm - 5:00pm: <input type="checkbox"/> QRS Reporting “Deep Dive”	<input type="checkbox"/> Cash Receipts
Previous Attendee? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Registration	Day	Quantity	Prior to 8/9/2011	After 8/9/2011	Total	Cancellation policy
Member Registration	Full Reg		\$525	\$625		All cancellations must be in writing. A \$50 processing fee will be withheld for cancellations received on/before August 17, 2011. No refunds will be issued for cancellations received after August 17, 2011 but replacement attendees are welcome.
Non-member Registration	Full Reg		\$675	\$775		
Optional Events						
One-Day	Wed 8/31		\$300	\$300		
One-Day	Thurs 9/1		\$300	\$300		
One-Day	Fri 9/2		\$300	\$300		
gomembers Dinner for guest			\$100	\$100		
Total Due						

Payment must accompany registration form. Make check payable to NAUG and mail with registration form to:
 NAUG - c/o Marcia Stratton; Illinois Bankers Association; 524 S Second St, Springfield, IL 62701 or Fax to 217-789-5410
 with credit card information:

Visa, MasterCard or Discover accepted.

Card Type/Number _____ Exp. Date _____

Cardholder's Name _____

Cardholder's Signature _____

Billing Address (if different from above) _____

City / State / Zip _____

Visit www.naug.net to register online and for the latest conference information and updates.