

# Registration Form

**N4CSGA Fall Division Meeting: Saturday, September 23, 2017**

- |                                  |  |
|----------------------------------|--|
| <input type="checkbox"/> Central | Randolph Community College               |
| <input type="checkbox"/> Eastern | Fayetteville Technical Community College |
| <input type="checkbox"/> Western | Caldwell Community College               |

Please email this form to Barb Meidl, Advisor, no later than 12:00 p.m. on Friday, September 8, 2017.

**Email: [barb.meidl@rccc.edu](mailto:barb.meidl@rccc.edu)**

College:		Advisor:	
SGA President:		Advisor Telephone:	
President's Email:		Advisor Email:	

Name (Print Clearly)	Office/Title	Delegate	Advisor	Guest
1.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Persons in Each Category				
Registration Fee		\$15.00	\$15.00	\$15.00
Total Amount for Each Category		\$	\$	\$

**Registration FORM is due by no later than 12:00 p.m. on Friday, Sep 8th**

**REGISTRATION PAYMENT:** There is no Late or On Site Registration. All registration payments should be made to the **N4CSGA. N4CSGA will only accept checks. Please mail registration payments to **Barb Meidl, Rowan-Cabarrus Community College, 1333 Jake Alexander Blvd. S, Salisbury, NC 28145.** We will accept payments on site the day of the meeting; however, payments must match the registration forms submitted by September 8, 2017.**

**REFUND POLICY:** Your institution will be responsible for payment of registration fees of all registered attendees unless written notice is received **five (5) days prior** to the day of the meeting. This is in accordance with the N4CSGA Operational Guidelines.

**SPECIAL NEEDS:** Attendees requiring accommodations for dietary or disability concerns should indicate these concerns by submitting a written request listing the requests at the time of registration. Requests for accommodations should be made **ten (10) working days before** the event date to allow event planners adequate time to arrange accommodations

**Special Accommodations:** Please include name of individual with special request(s) or dietary restrictions. This information will be provided to the host school to insure the individual's needs are met for lunch. Thank you.
