

**Aug 3-5, 2022**

Group Registration Form

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**Email this form to register now!**

Email: [info@neicweb.com](mailto:info@neicweb.com)

Please save the filled form on your PC and email as an attachment This form may be copied for additional registrations.

**Conference:** Aug 3-4, 2022

**Workshop:** Aug 5, 2022

**Venue:** Las Vegas

**Main Group Coordinator Contact Information**

Contact person for any questions regarding these registrations

Name \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mobile No. (Optional) \_\_\_\_\_

**School/Organization Details**

School \_\_\_\_\_

Type \_\_\_\_\_ Number of Students \_\_\_\_\_

Website \_\_\_\_\_

Address1 \_\_\_\_\_

Address2 \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

**Refund Policy, Delegate Cancellations and Transfer**

Registration cancellation requests received in writing at least thirty days (30 days) prior to the event will qualify for a full refund and less than 5% administrative fee. Should the original delegate be unable to attend, a

**substitute delegate** is welcome at **no extra charge**. Any cancellation or substitution requests should be made to [info@neicweb.com](mailto:info@neicweb.com)

**Confirmation Details / Shipping Policy**

SyllabusX conferences registration is electronic only. No items will ship in hard copy via mail or postal service. After completing registration online or emailing a registration form, you will receive a confirmation email with a summary of your registration details, which we recommend you retain for your own records. Delegates can receive their printed badge upon presenting a valid government-issued ID. If you do not receive an email confirming your registration details two weeks prior to the conference, please contact SyllabusX.

**Group Registration Discount:** Complimentary Registrations are available for groups of three paid attendees or more from the same organization are available.

**Registration Fees** are inclusive of program materials, conference breakfast, lunch and breaks.



- Small Team (6 Registrations Total)**  
5 Full Price Registrations + 1 Free
- Medium Team (10 Registrations Total)**  
8 Full Price Registrations + 2 Free
- Large Team (14 Registrations Total)**  
7 Full Price Registrations + 3 Free

| Registration Type   |                       | By 2.25.22                       | By 3.25.22                       | Standard                         | Onsite                           | Delegates | Total |
|---|-----------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|-----------|-------|
| <b>Academic, Nonprofit &amp; Government Organizations</b> | Conference Only       | <input type="checkbox"/> \$995   | <input type="checkbox"/> \$1,050 | <input type="checkbox"/> \$1,085 | <input type="checkbox"/> \$1,160 |           |       |
|   | Conference & Workshop | <input type="checkbox"/> \$1,095 | <input type="checkbox"/> \$1,185 | <input type="checkbox"/> \$1,350 | <input type="checkbox"/> \$1,425 |           |       |
| Conference Documentation                                  |                       | <input type="checkbox"/> \$765   | <input type="checkbox"/> \$775   | <input type="checkbox"/> \$785   | <input type="checkbox"/> \$860   |           |       |
| <b>Commercial Registration</b>                            | Conference Only       | <input type="checkbox"/> \$1,795 | <input type="checkbox"/> \$1,895 | <input type="checkbox"/> \$1,995 | <input type="checkbox"/> \$2,070 |           |       |
|   | Conference & Workshop | <input type="checkbox"/> \$1,995 | <input type="checkbox"/> \$2,095 | <input type="checkbox"/> \$2,250 | <input type="checkbox"/> \$2,325 |           |       |

**Payment Information**

**CHARGE** (Indicate type)  Visa  Master Card  American Express

Name on Card \_\_\_\_\_ Security Code \_\_\_\_\_

Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_

**CHECK** is enclosed payable to SyllabusX  **MONEY ORDER** is enclosed payable to SyllabusX

**PURCHASE ORDER\* NO.**

Purchase Order must be attached and list all participant(s)  
 \* We accept purchase orders from educational institutions such as Schools, School Districts, Universities, Colleges and Government institutes.

Billing Organization \_\_\_\_\_

Attention \_\_\_\_\_

Billing Email \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Total Amount for Paid Registrant(s)**

**Ways to Register**

**Register Online:**  
[www.neicweb.com](http://www.neicweb.com)

**Register by Email:**  
 Send registration form and credit card info or purchase order to [info@neicweb.com](mailto:info@neicweb.com)

**Register by Mail:**  
 Send form with check, PO or credit card information to  
 SyllabusX  
 1900 Campus Commons Drive #100  
 Reston, VA 20191

**Register Onsite:**  
 Aug 3-5

**Aug 3-5, 2022**

NEIC-2022 Group Registration Form

[Reset](#) [Print Form](#)

Complete this registration form if you would like to register 3 or more individuals from your school or organization to attend the NEIC-2022 Conference in Las Vegas, Nevada.

Group Name \_\_\_\_\_ Total Number of Registrants \_\_\_\_\_

### Group Registrant Information

**Name(s) of Paid Registrant(s)**

| No. | First Name | Last Name | Title | School/Organization | Email |
|-----|------------|-----------|-------|---------------------|-------|
| 1   |            |           |       |                     |       |
| 2   |            |           |       |                     |       |
| 3   |            |           |       |                     |       |
| 4   |            |           |       |                     |       |
| 5   |            |           |       |                     |       |
| 6   |            |           |       |                     |       |
| 7   |            |           |       |                     |       |
| 8   |            |           |       |                     |       |
| 9   |            |           |       |                     |       |
| 10  |            |           |       |                     |       |

To add more registrants, please copy this page.

**Name(s) of Free Registrant(s)**

| No. | First Name | Last Name | Title | School/Organization | Email |
|-----|------------|-----------|-------|---------------------|-------|
| 1   |            |           |       |                     |       |
| 2   |            |           |       |                     |       |
| 3   |            |           |       |                     |       |
| 4   |            |           |       |                     |       |
| 5   |            |           |       |                     |       |
| 6   |            |           |       |                     |       |
| 7   |            |           |       |                     |       |
| 8   |            |           |       |                     |       |
| 9   |            |           |       |                     |       |
| 10  |            |           |       |                     |       |

To add more registrants, please copy this page.