



2024 Conference Registration Form October 22 & 23 DoubleTree by Hilton, Charlottesville

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ E-mail: _____

Registration: (Registration includes breaks and working lunches)

VAACE Member Registration:

- \$200.00 In-person - *Must be postmarked by October 11th
- \$35.00 Virtual - *Must be postmarked by October 11th

Non-VAACE Member Registration:

- \$250.00 In-person - *Must be postmarked by October 11th
- \$50.00 Virtual - *Must be postmarked by October 11th

Presenters (1 per workshop):

- \$150.00 *Must be postmarked by October 11th
(Includes complementary VAACE/COABE membership)

Meals: *note special dietary request*

- Vegetarian Vegan Gluten Free Other: _____

Total Registration: _____

Additional fees:

- \$30.00 VAACE Membership Dues (New or Renewal)
- \$.00 VAACE Lifetime Member
(Please note, the membership year is Oct 1, 2024 through Sept. 30, 2025)

Total Membership: _____

Grand Total: _____

Amount enclosed: _____ Check # _____ Purchase Order # _____

Credit card payment: use PayPal below link to pay

Purchase Orders: Please list names of all participants on the purchase order with the dates attending and include the name and address of the fiscal agent. Purchase Orders will be invoiced for the amount issued.
VAACE Tax-Exempt # 54-1283575

Cancellation Policy: All requests for refunds must be received in writing by October 11, 2024.
After October 11th, no refunds will be issued, although another staff member may take your place.

Return registration to: Betsy Mathias, Registration Chairperson
6120 North Danford Street
Fredericksburg, VA 22407
540-850-2088(h)
bcmathias@aol.com

Hotel reservations are the responsibility of each registrant. Visit:

[VAACE Room Block](#) to receive the conference room rate.

PayPal link: [PayPal.Me/VAACE2018](https://www.paypal.com/VAACE2018) (This is the correct link for the 2024 conference.)