



2010 NASC NATIONAL CONFERENCE CREDIT CARD AUTHORIZATION FORM FOR DIRECT REGISTRATIONS ONLY

Cash and/or purchase orders cannot be accepted.

Total # of delegates: _____ x Amount per member person: \$ **425.00** = \$ _____

_____ x Amount per non-member person: \$ **525.00** = \$ _____

_____ x Amount per spouse evenings only: \$ **375.00** = \$ _____

Total Amount to be charged: \$ _____

Credit Card: AMEX Mastercard Visa

Personal card School/business card

Account #: _____ Expiration Date: _____
(month/year)

Billing name and address on credit card:

Cardholder's Name: _____

Address: _____

City/State/Zip: _____

Signature: _____ Date: _____

(Charges must be verified with the charge company before registration can be processed.)

**Please mail or fax this form along with completed registration form(s) by April 1, 2010 to:
NASSP/NASC Conference
P.O. Box 3250
Reston, VA 20195-1250**

**OR
Fax: (703) 476-9321 to Kathy Jones**