

ASAP FOIA-Privacy Act Workshop - 2024 Registration Form

Course # 1890

September 4 – 6, 2024 – Pittsburgh, Pennsylvania
Sheraton Pittsburgh Hotel at Station Square

REGISTRATION CLOSSES AUGUST 23, OR SOONER IF PROGRAM CAPACITY IS REACHED

Registration Instructions

Telephone registrations ARE NOT accepted. Please register by completing the form below and faxing or emailing it to ASAP. ASAP reserves the right to close registration when program capacity is reached. (Upon registration closure, a notice will be placed on the ASAP website.) **Registrations without payment information or proper authorization signatures will NOT be accepted.** Please print clearly and avoid using abbreviations for agency names/components. Registration lists, name badges, certificates, etc. are based on this information. Save \$50 by registering and paying online! Please enclose with your registration form a list of any special needs. ASAP, in compliance with the ADA is happy to assist (Please register by August 19, 2024 so that we can try to accommodate any needs). See accesspro.org for more details.

Registrant Information

The names of participants registered for ASAP training **may be shared** among fellow attendees including agency/company affiliation and city/state location (as submitted for registration purposes or pulled from the database). Registrants also may specifically opt-in for email address sharing. By registering for the event, participants agree to share their information with fellow event attendees and event sponsors to facilitate networking among parties. This information is also shared with ASAP board and committee members for analysis purposes. ASAP also compares the attendance roster with the hotel staff to ensure hotel compliance with the contract incentives. Additionally, by registering, participants give permission to use photographs and video which may include them for marketing purposes including social media marketing. Those who do not wish to have their information included on the roster of attendees or appear in any photos should contact us at training@accesspro.org. ASAP does NOT post online any event rosters.

Health and Safety Protocols

ASAP complies with all CDC and local health authority guidelines. All participants will be required to follow established protocols that are put into place. The ASAP Board of Directors monitors health and safety conditions and may set additional protocols that will be posted.

Hotel Rate for The Sheraton

The Sheraton is offering ASAP a hotel rate of \$136 single or double occupancy.

ASAP also successfully negotiated several contract incentives with the event hotel, Sheraton. These incentives are directly based on how many of our registrants stay at the event hotel. ASAP is passing these savings onto each registrant through the registration fee for those who stay at the event hotel. Local attendees are also entitled to these lower rates. ASAP and the hotel will compare registration lists to ensure policy and contract compliance.

Cancellation Policy and Fee

All cancellations must be received in writing at training@accesspro.org. Substitutions (one person for all days) are acceptable at any time and should be submitted to the ASAP office in writing if time allows. If time does not allow substitutions at the door will be accepted (one person for all days). Differences in member and nonmember registration fees will be charged. In the event of a cancellation, refunds will be issued after the training event.

Cancellations received through July 15 receive a refund, minus a 25% administrative fee

Cancellations received by August 9 receive a refund, minus a 50% administrative fee

Cancellations received by August 23 receive a refund, minus a 75% administrative fee

Cancellations received after August 23 = No Refunds

American Society of Access Professionals

1120 20th St. NW, Suite 750, Washington, DC 20036-3441
Tel: 202-712-9054 E-Fax: 202-216-9646 Analog Fax: 202-216-0246
E-mail: training@accesspro.org Website: www.accesspro.org

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TUITION/REGISTRATION FEE CHART

1) Tuition/Fees include the:

- 2.5 Day Workshop
- presentation materials that are downloadable for paid registrants
- early morning coffee, mid-morning and afternoon coffee breaks
- two group luncheons

2) There are no one or two-day pricing options.

3) The hotel sleeping room is a separate charge (See above).

4) How can you save money? *Register and pay immediately on-line with a credit card to receive a \$50 discount. The system assumes that the registrant and the cardholder are the same person.*

Add \$25 to the total if you are applying for Virginia or Pennsylvania CLE.

	Submitted by		
	Until July 15	July 16 – August 9	August 10 - 23
<u>MEMBERS</u>			
*Member, Local Commuter	\$1,100	\$1,250	\$1,400
Member, Staying at Event Hotel	\$1,100	\$1,250	\$1,400
Member, Staying Elsewhere (Non-local)	\$1,400	\$1,550	\$1,700
<u>NON-MEMBERS</u>			
*Nonmember, Local Commuter	\$1,225	\$1,375	\$1,525
Nonmember, Staying at Event Hotel	\$1,225	\$1,375	\$1,525
Nonmember, Staying Elsewhere (Non-local)	\$1,525	\$1,675	\$1,825

**Local Commuter is defined as an attendee who is traveling within fifty (50) miles of their duty station*

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Registrations will be rejected if they do not have complete POC information for cardholders and invoicing POCs

Registrant Information (All Fields Required)

Last Name: _____ First Name: _____

Nickname: _____ Title/Position: _____

Dept/Agency/Org.: _____ Agency/Office: _____

Mailing Address: _____

City: _____ State: _____

Zip: _____ Tele: _____

Registrant E-mail: _____

Please list any special needs. ASAP, in compliance with the ADA, is happy to assist (Must register by August 19, 2024).

Yes No Are you an ASAP Member? (ASAP is a nonprofit, professional member society. Federal, state, or local government employment does not automatically entitle one to ASAP membership or member discounted program fees.)

Yes No I agree to abide by the established health and safety protocols.

Yes No Are you staying at the training event hotel?

Yes No Are you a local commuter? (Within 50 miles of your duty station)

Yes No Publish my E-mail in e-mail column of the Attendee roster for networking purposes

Yes No Are you an attorney? If so, which state(s)? _____

Yes No Will you be applying for Virginia or Pennsylvania CLE? **If yes, please include an additional \$25 in the total amount.**

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Payment

Please refer to the procedures for registration, confirmations, receipts and cancellation fee policy. Registration MUST be accompanied by a credit card and authorized signature or completed and signed training authorization forms (i.e., SF-182).

Purchase order documents **should have the correct pricing for the submission date to ASAP**. Please take into account how long it may take your agency to process the paperwork approvals. ASAP will apply the correct pricing, if the paperwork reflects a price too high for the time frame it is submitted.

PAYMENT AMOUNT: \$ _____ Please be sure the payment amount matches the date of registration submission to ASAP

Payment Method: (Please checkmark)

- Attached, Signed Training Authorization (SF-182 or other proper authorization)
MUST HAVE INVOICING POC AND PROPER SIGNATURES/AUTHORIZATIONS
- Credit Card (VISA, MasterCard, American Express, GPC) Cards are processed weekly, PRIOR to the program.
- Check/ Money Order Enclosed: _____ Check #: _____

FOR CREDIT CARD PROCESSING - Please provide information below (All Fields Required). We cannot process payment without an address that is attached to the card. If the cardholder wants a receipt, then you MUST provide an email address for the cardholder.

Please contact me for full credit card information at the below telephone number.

Card Holder Name: _____

Card Holder Email: _____

Card Holder Phone: _____

Card Holder Address (as attached to the card): _____

Card Holder City, State, Zip: _____

Card Holder Signature: _____

Once payment has been processed, cardholders and the registrant will receive an acknowledgement receipt. The card number is not listed. Registrants will also receive a separate confirmation letter.