



Re:Defining Excellence in Scholarship & Artistry

REGISTRATION INFORMATION (please complete)

Name _____
 Address 1 _____
 Address 2 _____
 City _____ State _____ Zip _____
 Business Phone _____
 Cell Phone _____ Email _____

SCHOOL/INSTITUTIONAL AFFILIATION

Name of School _____
 Director _____

REGISTRATION FEES

		<u># of Attendees</u>	<u>Subtotals</u>
Organizational Fee (each institution)	\$105		_____
Student (early registration)	\$65	x _____	_____
Student (after Jan 20th)	\$75	x _____	_____
Director/Faculty	\$105	x _____	_____
Individual	\$85	x _____	_____
Lifetime Membership	\$500	x _____	_____
Banquet Only	\$35	x _____	_____

TOTAL _____	_____
	Fees

BILLING METHOD

____ Check ____ Online ____ Cash
 ____ Credit
 Credit Card # _____

 Exp. Date Sec. Code (on back of card)
 Name of Cardholder _____
 Billing Address 1 _____
 Billing Address 2 _____
 City _____ State _____ Zip _____

MAKE CHECKS PAYABLE TO: National Association of Dramatic & Speech Arts, Inc. (NADSA, Inc.)
Mail payments: c/o Karl Norman, Executive Treasurer
 P. O. Box 4276
 Grambling, LA 71245
 Pre-Register by Email: nadsainc1936@gmail.com

Note: If paying for more than one attendee please complete conference registration form for EACH person.