



NON-EXHIBITOR ASSOCIATE MEMBER REGISTRATION FORM

Register online at www.camex.org

COMPANY INFORMATION

NACS Member Number

Company Name

Company Address

City State/Province ZIP/Postal Code

Phone Fax

Name of Person Submitting Form

E-mail

Emergency Contact and Phone

CONTACT

Please refer questions or submit cancellations to:
NACS Registrar
500 E. Lorain St.
Oberlin, OH 44074
Phone: (440) 775-7777, ext. 2277
FAX: (440) 775-1920
E-mail: bkitts@nacs.org

REGISTRATIONS

Please print first and last names for badges. Please provide e-mail addresses for confirmation.

	Fee
1. _____ x	\$600
e-mail _____	
2. _____ x	\$600
e-mail _____	
3. _____ x	\$600
e-mail _____	
4. _____ x	\$600
e-mail _____	
REGISTRATIONS TOTAL	\$ _____

REGISTRATION AND CANCELLATION INFORMATION

Registering before Jan. 15

Your badge will be mailed to you at least two weeks before the event.

Badges will not be sent to countries outside the U.S. Residents of other countries may pick up badges on site. Please bring your confirmation with barcode to the CAMEX Scan & Go Stations in Orlando, FL.

Registering between Jan. 15 and Feb. 12

Pre-register online at www.camex.org and pick up your badge and tickets (if applicable) at the CAMEX Scan & Go Stations in Orlando, FL. You will need your confirmation with barcode.

Registering after Feb. 12

Please wait to register in Orlando, FL at the CAMEX On-site Registration Desk.

PAYMENT

I understand that by registering for CAMEX, I am responsible for the cost of my registration, subject to the cancellation policy. I am also granting consent for use of any photos taken and for use by NACS.

Check enclosed (Make payable to NACS-CAMEX 2010. Payable in U.S. Funds only.)

Charge to my American Express MasterCard VISA
(Credit card must be valid through the dates of this event.)

Account Number

Expiration Date 3-4 Digit Security Code

Cardholder Signature

Cardholder Name (please print)

Billing Address

City State/Province ZIP/Postal Code

CANCELLATIONS

In order to receive a refund, you must notify NACS in writing by mail, fax, or e-mail before Feb. 26. Tickets and badge must be returned to the NACS Registrar before your refund will be processed. No refunds will be made after Feb. 26 or for no-shows.

See Additional Ticket & Event Information on Back.

ADDITIONAL TICKETS

The tickets listed below **are included in retail store Full Registration** but must be purchased for all other registrations.

	Qty.	Fee
Opening Night (Friday, March 12)	_____	\$40
Book & Author Breakfast (Saturday, March 13)	_____	\$40
Grand Finale (Sunday, March 14)	_____	\$60

Not included in retail store Full Registration. Must be a CCRA member to purchase.

CCRA Business Meeting and Lunch (Saturday, March 13)	_____	\$25
CCRA Social Event (Saturday, March 13)	_____	\$25

ADDITIONAL TICKETS SUBTOTAL \$ _____

First Name
Last Name
NACS Member Number

REGISTRATION OPTIONS

Online: www.camex.org
Fax: (440) 775-1920
Mail: 500 E. Lorain St.
Oberlin, OH 44074

ADDITIONAL EVENTS

The events listed below are not included in any registration packet.

Retail Learning Tour

THURSDAY, MARCH 11 (1-5:30 p.m.) (Pre-registration ONLY / No on-site registrations)

- The Mall at Millenia Retail Learning Tour (\$55 member pp, \$85 non-member pp, 20 min., 53 max.)

College Store Tour

THURSDAY, MARCH 11 (1:30-5 p.m.)

- Orange County Campus and Technology Stores Tour (\$55 member pp, \$85 non-member pp, 20 min., 53 max.)

Includes:

- Valencia Community College – East Campus
- University of Central Florida – Computer Store
- University of Central Florida – UCF Bookstore
- Rollins College – Rice Family Bookstore & Café

CHOOSE ONLY ONE

Bonus Session

MONDAY, MARCH 15 (2:30-4:30 p.m.) (Pre-registration ONLY / No on-site registrations)

- Disney Institute* Presents: Disney's Approach to Quality Service **Free** (Store attendees must have Full Registration and be staying in an official CAMEX hotel; \$150 for all others) (Registration required. 500 max.)

ADDITIONAL EVENTS SUBTOTAL \$ _____

PAYMENT

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- Check enclosed (Make payable to NACS-CAMEX 2010. Payable in U.S. Funds only.)

Charge to my American Express MasterCard VISA (Credit Card must be valid through the dates of this event.)

Account Number		
Expiration Date	3-4 Digit Security Code	
Cardholder Signature		
Cardholder Name (please print)		
Billing Address		
City	State/Province	ZIP/Postal Code

TOTAL FEES

Registration Fee	\$ _____
Additional Tickets Fee	\$ _____
Additional Events Fee	\$ _____
TOTAL DUE	\$ _____

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