

# American Congress on School Nutrition

## July 13-15 Las Vegas, NV

**July 13-15, 2022**

Group Registration Form

[Reset](#) [Save](#) [Print Form](#)

Please save the filled form on your PC and email as an attachment This form may be copied for additional registrations.

**Conference:** July 13-14, 2022

**Workshop:** July 15, 2022

**Venue:** Las Vegas

**Refund Policy, Delegate Cancellations and Transfer**

Registration cancellation requests received in writing at least thirty days (30 days) prior to the event will qualify for a full refund and less than 5% administrative fee. Should the original delegate be unable to attend, a

**substitute delegate** is welcome at **no extra charge**. Any cancellation or substitution requests should be made to [info@ik12nutrition.com](mailto:info@ik12nutrition.com)

**Confirmation Details / Shipping Policy**

After completing registration online or emailing a registration form, you will receive a confirmation email with a summary of your registration details, which we recommend you retain for your own records.

Delegates can receive their printed badge upon presenting a valid government-issued ID. If you do not receive an email confirming your registration details two weeks prior to the conference, please contact SyllabusX.

**Group Registration Discount:** Complimentary Registrations are available for groups of three paid attendees or more from the same organization are available.

**Registration Fees** are inclusive of program materials, conference breakfast, lunch and breaks.

**Email this form to register now!**

Email: [info@ik12nutrition.com](mailto:info@ik12nutrition.com)

**Main Group Coordinator Contact Information**

Contact person for any questions regarding these registrations

Name \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mobile No. (Optional) \_\_\_\_\_

**School/Organization Details**

School \_\_\_\_\_

Type \_\_\_\_\_ Number of Students \_\_\_\_\_

Website \_\_\_\_\_

Address1 \_\_\_\_\_

Address2 \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_



- Small Team (6 Registrations Total)** 5 Full Price Registrations + 1 Free
- Medium Team (10 Registrations Total)** 8 Full Price Registrations + 2 Free
- Large Team (14 Registrations Total)** 11 Full Price Registrations + 3 Free

Registration Type		By 2.25.22	By 3.25.22	Standard	Onsite	Delegates	Total
<b>Academic, Nonprofit &amp; Government Organizations</b>	Conference Only	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1,050	<input type="checkbox"/> \$1,085	<input type="checkbox"/> \$1,160		
	Conference & Workshop	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,185	<input type="checkbox"/> \$1,350	<input type="checkbox"/> \$1,425		
Conference Documentation		<input type="checkbox"/> \$765	<input type="checkbox"/> \$775	<input type="checkbox"/> \$785	<input type="checkbox"/> \$860		
<b>Commercial Registration</b>	Conference Only	<input type="checkbox"/> \$1,795	<input type="checkbox"/> \$1,895	<input type="checkbox"/> \$1,995	<input type="checkbox"/> \$2,070		
	Conference & Workshop	<input type="checkbox"/> \$1,995	<input type="checkbox"/> \$2,095	<input type="checkbox"/> \$2,250	<input type="checkbox"/> \$2,325		

**Payment Information**

**CHARGE** (Indicate type)  Visa  Master Card  American Express

Name on Card \_\_\_\_\_ Security Code \_\_\_\_\_

Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_

**CHECK** is enclosed payable to SyllabusX  **MONEY ORDER** is enclosed payable to SyllabusX

**PURCHASE ORDER\* NO.**

Purchase Order must be attached and list all participant(s)

\* We accept purchase orders from educational institutions such as Schools, School Districts, Universities, Colleges and Government institutes.

Billing Organization \_\_\_\_\_

Attention \_\_\_\_\_

Billing Email \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Total Amount for Paid Registrant(s)**

**Ways to Register**

**Register Online:**  
[www.ik12nutrition.com](http://www.ik12nutrition.com)

**Register by Email:**  
Send registration form and credit card info or purchase order to [info@ik12nutrition.com](mailto:info@ik12nutrition.com)

**Register by Mail:**  
Send form with check, PO or credit card information to  
SyllabusX  
1900 Campus Commons Drive #100  
Reston, VA 20191

**Register Onsite:**  
July 13-15

**July 13-15, 2022**

ACSN-2022 Group Registration Form

[Reset](#) [Print Form](#)

Complete this registration form if you would like to register 3 or more individuals from your school or organization to attend the ACSN-2022 Conference in Las Vegas, Nevada.

Group Name \_\_\_\_\_ Total Number of Registrants \_\_\_\_\_

**Group Registrant Information**

**Name(s) of Paid Registrant(s)**

No.	First Name	Last Name	Title	School/Organization	Email
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

To add more registrants, please copy this page.

**Name(s) of Free Registrant(s)**

No.	First Name	Last Name	Title	School/Organization	Email
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

To add more registrants, please copy this page.