



## 2019 NACSW Convention Student Volunteer Application & Registration

Name: \_\_\_\_\_

Primary E-mail: \_\_\_\_\_ Alternate E-mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

College/University that you attend: \_\_\_\_\_

Currently, I am a(n):     Undergraduate student     Master student     Doctorate student

Are you the designated leader for your group?     Yes     No

If you answered "No" to the question above, please list your group leader: \_\_\_\_\_

Is this your first time attending a NACSW convention?     Yes     No

### Accommodations

I'll be staying at the Indianapolis Marriott East. I understand I need to make my own reservation by calling (317)352 1231 and that I must tell the Indianapolis Marriott East that I am affiliated with the North American Association of Christians in Social Work and book by 10/16/2019 in order to receive the preferred rate.

Other \_\_\_\_\_

***We ask our volunteers to wear a conference t-shirt during their assigned volunteer shifts. We will provide t-shirts at the convention.***

Preferred T-shirt size:     Small     Medium     Large     1X Large     2X     3X

### Volunteer Schedule Choices:

Please list your 1<sup>st</sup> and 2<sup>nd</sup> choices for your volunteer slot.

\_\_\_\_\_ Thursday, November 7<sup>th</sup>2019

\_\_\_\_\_ Friday, November 8<sup>th</sup>2019

\_\_\_\_\_ Saturday, November 9<sup>th</sup>2019

Do you have experience connecting LCD projectors to laptop computers?     Yes     No

What day and time will you be arriving at the convention? \_\_\_\_\_

What day and time will you be leaving the convention? \_\_\_\_\_

Please add any additional comments about days/times you will not be available to volunteer (for example, if you are a workshop presenter). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PAYMENT

**\$112 Non-member Rate** (includes 6-month NACSW membership at no additional cost  
OR

**\$92 Member Rate** (applies to current individual members of NACSW only)

**\*\*NOTE\*\***Registration rate includes attendance to all convention workshop sessions, plenary sessions and banquet, but not pre-convention institutes.

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My check or money order is enclosed and made payable to: NACSW

OR

My credit card information is provided below. Please bill my credit card \$\_\_\_\_\_ convention registration.

Visa     MasterCard     American Express

Cardholder's Name \_\_\_\_\_

Card Number \_\_\_\_\_ Card Expiration Date \_\_\_\_\_ / \_\_\_\_\_

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

CVV Number \_\_\_\_\_ (For Visa or MasterCard, this is the last three digits of the number printed on the signature strip on the back of your card. For American Express, this appears as a separate 4-digit code printed on the front of your card.)

### REFUND POLICY

Refunds, minus a \$25 processing fee, are available, if requested, until October 18, 2019. After this date refunds are not available.

## STUDENT VOLUNTEER AGREEMENT

I would like to be a student volunteer at NACSW Convention 2019 in Indianapolis, Indiana to be held from November 7<sup>th</sup> – 10<sup>th</sup> 2019. I understand that in exchange for volunteering at the Convention up to 6 – 10 hours, I will receive this discounted student volunteer registration rate.

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

**Please provide us with an emergency contact person while you are joining us at the convention.**

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

**Please mail this form and your registration payment no later than October 18th, 2019 to:**

NACSW  
P.O. Box 121  
Botsford, CT 06404

If you have questions or concerns about your application, please contact the NACSW office at [info@nacs.org](mailto:info@nacs.org) or 203-270-8780.

**Note:** NACSW may videotape or take photographs of convention participants. These may be posted on NACSW's website. If you have a concern about photo/video usage, contact the NACSW office at 888-426-4712.