

## 2019 Conference Registration

| Attendee Information                                                                                                                                                          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| First Name                                                                                                                                                                    |  |
| Last Name                                                                                                                                                                     |  |
| Degree/Credential                                                                                                                                                             |  |
| Address                                                                                                                                                                       |  |
| City                                                                                                                                                                          |  |
| State                                                                                                                                                                         |  |
| Zip                                                                                                                                                                           |  |
| Telephone Number                                                                                                                                                              |  |
| Email Address                                                                                                                                                                 |  |
| Will you be attending the Friday Reception Night of the conference? Yes No                                                                                                    |  |
| Payment Information                                                                                                                                                           |  |
| Participant Registration - \$175 Student Registration - \$85                                                                                                                  |  |
| Please make checks payable to WNDA and send the forms and checks to the following address. (You may also register and pay through our website at http://www.wisconsin-nd.org) |  |
| WNDA Attention: Rebecca Georgia PO Box 14434                                                                                                                                  |  |

Madison, WI 53708