

2019 NATIONAL CONFERENCE REGISTRATION FORM

- \$180** Pre-Registration for Members (PREPAID and POSTMARKED by February 8, 2019)
- \$150** Pre-Registration for Guest/Spouse (PREPAID and POSTMARKED by February 8, 2019)
- \$230** Member Registration Fee after February 8^m and On-site
- \$200** Guest/Spouse Fee after February 8^m and On-site



I require a SPECIAL DIET for the Banquets which is _____.

*****Submit only ONE person per Registration Form, please print additional forms.**

******* Please Print Legibly or Type and Complete ALL Information *******

Name _____ Email _____

Address _____

City _____ State _____ Zip _____ Phone () _____

MEMBERSHIP # (found on card) _____ **CHAPTER** _____ **REGION** _____

ACJA/LAE Officer Status: **Chapter** **Regional** **National** **Chapter Advisor**

EMERGENCY NOTIFICATION INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____ Phone () _____

COMPETITION CATEGORY

- Lower Collegiate** (less than 70 semester hrs/105 quarter hrs) **Upper Collegiate** (more than 70 semester hrs/105 quarter hrs)
- Professional** (if you have been compensated for services rendered in the Criminal Justice discipline)

COMPETITIONS YOU PLAN TO COMPETE IN

- Physical Agility: Male Female Age: _____ (for competition level)
- Criminal Law Corrections Juvenile Justice Police Management
- LAE Knowledge Crime Scene Firearms: _____ Individual _____ Team

Make Checks/Money Orders Payable to: ACJA/LAE National Conference

Please send checks/money orders to: ACJA/LAE
P.O. Box 601047
Sacramento, CA 95860-1047

Registrar Use Only	
Member #	_____
Chapter	_____
Exp. Date	_____

EARLY REGISTRATION IS ENCOURAGED TO RECEIVE A PRINTED NAME BADGE. WE WILL NOT HAVE A COMPUTER OR PRINTER ON-SITE AT REGISTRATION TO PRINT NAME BADGES. PLEASE INCLUDE REGISTRATION FEES ONLY. SEND ANY OTHER PAYMENTS SEPARATELY. NO REGISTRATION FEES WILL BE RETURNED AFTER FEBRUARY 15, 2019.

Registrar Use Only		
Amt Paid \$	_____	Check/Money Order No. _____
		Receipt # _____