



2019 SCAHCE Conference

## Participant Registration Mail In Form

**One Team, One Goal – Creating Partnerships that Win!**

October 3-4, 2019

Piedmont Technical College 620

620 North Emerald Road

Greenwood, SC 29648

### Registration

**Registration:**

- |                          |                           |  |                   |
|--------------------------|---------------------------|--|-------------------|
| <input type="checkbox"/> | Early Bird Registration   | \$159 (On or Before September 1, 2019) |                   |
| <input type="checkbox"/> | Regular                   | \$199                                  |                   |
| <input type="checkbox"/> | Membership Only 2019-2020 | \$50                                   |                   |
| <input type="checkbox"/> | Presenter                 | Complimentary                          | PROMO CODE: _____ |

### Personal Information

First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_  
Job Title\* \_\_\_\_\_ Institution\* \_\_\_\_\_  
Primary Phone\* \_\_\_\_\_ Email\* \_\_\_\_\_  
Address\* \_\_\_\_\_  
City\* \_\_\_\_\_ State\* \_\_\_\_\_ Zip\* \_\_\_\_\_

### Special Assistance | Requests

Please indicate if you need any form of assistance with conference facilities. Please be as specific as possible.

\_\_\_\_\_

Please indicate if you have any dietary restrictions or special requests.

\_\_\_\_\_

## Questions

If you are experiencing difficulties with the registration process or have general questions regarding the conference please contact Conference & Event Services at 803-777-9444 or [confs@mailbox.sc.edu](mailto:confs@mailbox.sc.edu)

Program questions can be directed to [scacheinfo@gmail.com](mailto:scacheinfo@gmail.com)

## Cancellation Policy

Substitutions may be made at any time by notifying the registration office by email at [confs@mailbox.sc.edu](mailto:confs@mailbox.sc.edu). The liability of SCAHCE Conference is limited to the registration fee and SCAHCE will not be responsible for any losses incurred by registrants or their families including, but not limited to, airline cancellation charges or hotel deposits. SCACHE reserves the right to cancel and refund all registration fees for any program due to circumstances beyond its control, including insufficient registration. No refunds available.

## Method of Payment (Mail or Fax)

CEC Office Use Only:

DATE: \_\_\_\_\_ MTH \_\_\_\_\_ \$ \_\_\_\_\_ APPVL \_\_\_\_\_ A \_\_\_\_\_ CC 4 \_\_\_\_\_ Exp \_\_\_\_\_

*Please complete the payment information and mail this registration form with your payment to:*

SCACHE  
c/o Continuing Education and Conferences  
University of South Carolina  
1705 College Street, Suite 591  
Columbia, SC 29208 USA

**You may FAX your registration to 803-777-2663.**

Make all methods of payment payable to the **SCACHE**. If you wish to charge your fees, enter your account number and sign below

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The charge on your credit card statement will appear from the University of South Carolina.

If paying by Purchase Order, please email [confs@mailbox.sc.edu](mailto:confs@mailbox.sc.edu) a copy of the PO. Sorry, PO number alone cannot be processed.

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