



NAC2021 Conference & Expo Attendee Registration

Company Information / Attendee Information

Company Name: _____

Attendee Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone: _____ E-Mail Address: _____

Website: _____

Current Member of NAC? ☐ Yes ☐ No Send me information about Joining NAC? ☐ Yes

I would like to join NAC now: ☐ Yes [Please complete the attached New Member application.]

Conference Pass	MEMBER	NON MEMBER
Early Bird Conference Registration (Available through July 11, 2021) (ATM Operators and ISOs)	\$345	\$595
Conference Registration (July 12 – October 14, 2021)	\$595	\$895
Spouse/Immediate Family Registration	\$250	\$250
By registering for NAC2021, you are agreeing to abide by NAC2021 Event Policies which you can view/download at https://www.natmc.org/events . You also are agreeing to allow NAC to use any photos or videos taken or recorded at NAC2021 for any and all NAC marketing purposes.		

Additional Conference Attendees

Attendee #2: _____ Email Address: _____

Title: _____ Phone: _____ Company: _____

Attendee #3: _____ Email Address: _____

Title: _____ Phone: _____ Company: _____

Attendee #4: _____ Email Address: _____

Title: _____ Phone: _____ Company: _____

Attendee #5: _____ Email Address: _____

Title: _____ Phone: _____ Company: _____

Payment Information

Payment Method: ☐ Cash ☐ Check ☐ Credit Card

Total Amount Due:

_____ + _____ = \$ _____
NAC2021 Attendee Registration(s) Amount NAC Membership Dues (if applicable) Total Amount Paid/Authorized

Payment by Check or Cash

Please make your check payable to: The National ATM Council, Inc.

Please mail to: The National ATM Council, Inc. • 9802-12 Baymeadows Rd. #196 • Jacksonville, FL 32256.

You may also scan/email your completed registration form to: nacevents@natmc.org or fax to: (904) 425-6010.

Payment by Credit Card

Please fill out the credit card payment information below and email your completed registration form to nacevents@natmc.org.

You may also fax your completed registration to NAC at (904) 425-6010 or Mail to:
The National ATM Council, Inc. • 9802-12 Baymeadows Rd. #196 • Jacksonville, FL 32256.

Cardholder Signature _____

Credit Card: ☐ Visa ☐ MasterCard ☐ Discover

Name as it Appears on Card: _____ Expiration Date: _____

Credit Card Number: _____

Billing Address (if different from registration address): _____

If you prefer to provide your credit card information by phone, please check the box below and call NAC at the number shown.

☐ **Will submit credit card information by phone. (Call NAC at 904-683-6533.)**

Your Health & Safety Are Important To Us!

Please rest assured that NAC will be taking appropriate measures to facilitate the health and safety of all NAC2021 participants. NAC encourages our Attendees and Vendors at NAC2021 to follow current and applicable public health and safety guidelines and precautions relative to large group gatherings at the time of the conference.

NAC2021 – ATTENDEE COVID-19 PANDEMIC WAIVER & RELEASE:

Despite everyone's very best efforts, some degree of risk may still exist in the context of a large indoor gathering such as NAC2021 to the extent COVID-19 pandemic conditions persist at the time of the Event. By attending NAC2021, each Attendee acknowledges and agrees on his/her own behalf and on behalf of Attendee's personnel, contractor(s), and family member(s) at the Event, to accept and assume all health and safety related risks or consequences associated with a potential or actual exposure to COVID-19, including its variants, while in attendance at the NAC2021 Conference & Expo. Such acknowledgment and agreement by Attendee also constitute an express waiver and release of NAC, its officers, directors, and contracted staff from any and all COVID-19 related liability or damages.

CANCELLATION / REFUND / SUBSTITUTION POLICY

Written notice of attendee cancellation received by NAC on or before SEPTEMBER 8, 2021, will result in a refund of fees paid less a \$50 processing fee. Please submit any cancellation requests to nacevents@natmc.org. **PLEASE NOTE:** No refunds will be provided for attendee cancellations received after SEPTEMBER 8, 2021. On-site no-shows are non-refundable.

Substitutions are encouraged and should be submitted to nacevents@natmc.org. Please include the original attendee's name and the substitute's full contact information (name, title, company, address, phone #, and email address). No-shows are non-refundable. Please provide NAC headquarters with notification regarding any substitutions prior to OCTOBER 4, 2021. After that date, substitutions will be processed on-site at the NAC2021 event.

Have questions? – Please call NAC at (904) 683-6533

Interested in Joining NAC?

Please complete the attached NAC membership application and submit along with this NAC2021 registration application and your total payment amount.



NAC2021 – NAC Membership Application Form
THE NATIONAL ATM COUNCIL, INC.

Representing US Independent ATM Providers, Processors & Vendors/Suppliers

Company Name: _____

Your Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (Office) _____ (Cell) _____

Email: _____ Fax: _____

Company Website: _____

Alt. Contact & Email Address: _____

Signature: _____ Date of Application: ____/____/____

MEMBERSHIP DUES

- ☐ ATM Operator – Affiliate (1-10 ATMs)..... \$100/year
- ☐ ATM Operator – Affiliate (11-50 ATMs)..... \$300/year
- ☐ ATM Operator – Affiliate (51+ ATMs).....\$1.50 per ATM/quarter*
*(Max \$350/quarter)
- ☐ ATM Operator (Registered ISO)..... \$1,400/year or \$350/quarter
- ☐ Vendor/Supplier..... \$750/year**
**[NAC ISO & ATM Operator Members Pay Only \$375 (50% Off) to add a Vendor Membership]

Indicate Payment Method:

- ☐ **PAYMENT BY CHECK:** Please make your dues checks payable to: The National ATM Council, Inc. and mail with completed application to address below.
- ☐ **PAYMENT BY CREDIT CARD** (As entered on Registration Form.): Please fill out the credit card information below (only if different from Registration Form card information) and mail, email, or fax completed application to the address below. If preferred, you may also submit credit card information by phone to NAC at 904-683-6533.

Credit Card Information: ☐ Discover ☐ MasterCard ☐ Visa

Cardholder Signature: _____

Name as it Appears on Card (Please Print): _____

Credit Card Number: _____ Exp Date: _____

Billing Address (if different from registration address): _____

The National ATM Council, Inc.
9802-12 Baymeadows Road, #196 • Jacksonville, FL 32256
Fax: (904) 425-6010 • Association E-Mail:

nacevents@natmc.org

Have questions or need more information, please call NAC HQ: (904) 683-6533

WELCOME TO NAC – THANK YOU FOR YOUR PARTICIPATION AND SUPPORT!

Join Us! * **NAC2021** Conference & Expo * October 12-14, 2021 * Caesars Palace, Las Vegas, NV