



Advisor Certification Conference

June 10, 17 & 24, 2025 * Virtual Conference via Zoom

Contact Information

College / Campus: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Registration Rates

- Regular- Member^ - \$229 per person - Registered by **MAY 30**
- Regular -Non-Member^ - \$299 per person - Registered by **MAY 30**
- Late - \$399 per person - Registered after **MAY 30**

Confirmations will be sent within 5 business days from the time we receive your registration. Please contact our office if you do not receive a confirmation.

Attendee Information

NAME <i>as you want it on your certification</i>	E-MAIL	TITLE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Conference Fee

Total# of Attendees

Membership Fee^

TOTAL Amount Due

After registration forms are received, we will send an invoice for payment via your preferred method. Credit card payments incur a 5% convenience charge.

^ Membership is \$350 per campus - membership runs from September 1, 2025 - August 30, 2026



Advisor Certification Conference
June 7, 10 & 24, 2025 * Virtual Conference via Zoom
Please type and fill out form completely

Submit forms and payment to:

ASACC Business Office - (Federal ID #54-1856723)
2279 North University Parkway - #165
Provo, UT 84604

FAX # -- 801-406-4385
Phone # - 801-368-2289
info@asacc.org

Cancellation Policy

All cancellations must be received in writing via email, mail or fax.

Full refunds minus a \$25 processing fee will be given for any cancellations received by May 1, 2025. Cancellations made after May 1, 2025, are subject to a \$100 service charge per person until May 15, 2025. Those canceling after May 15, 2025 and persons who sign up for the conference but do not attend will be charged the full registration price.

Substitutions and name changes may be made at any time via email, mail or fax.

Liability

The "Conference Management"(ASACC, Advisors Institute, their officers, directors, agents, and employees) shall not have any responsibility or liability for personal injury en route to and from the Advisor Institute Certification Conference or at any time on the site. The "Conference Management" shall not have responsibility of liability for unsafe or illegal acts of the hotels, suppliers, entertainers, tour operators, and airlines that are directly or indirectly involved with the conference. Attendees who purchase non-refundable airline tickets do so at their own risk. I agree that any photographs or video tapes taken of me, or my delegation may be used for conference promotional purposes or resale. The total amount of any liability of the "Conference Management" will be limited to a refund of the attendance fee.

By signing below I agree to the above policies and guarantee payment to ASACC for the registrants listed, based on the conditions above.

ALL ATTENDEES MUST SIGN AND SUBMIT THIS FORM

Signature: _____

Typed Name: _____

College: _____

Date: _____