



2019 ANNUAL CONVENTION

COMPLETE & RETURN TO:

ADDRESS 1016 16th Street, NW, Suite 101
Washington, DC 20036
FAX (202) 293-3388
EMAIL info@badc.org

Please complete and return with your payment.

CONTACT INFO

NAME _____

FIRM/ORGANIZATION NAME _____

ADDRESS _____

PHONE _____ FAX _____

EMAIL _____ WEBSITE _____

FEES

PAYMENT FOR VISA \$85 per visa Qty: _____
Subtotal: \$ _____

PAYMENT FOR COLLECTIVE GRATUITY \$154.89 per person Qty: _____
Subtotal: \$ _____

PAYMENT FOR BADC ADMIN FEE

BADC Fellows Pay No Admin Fee until after March 9

	Fellow	Member	Non-Member	
<u>Early Bird</u> (until Midnight February 5)	<input type="checkbox"/> No Fee	<input type="checkbox"/> \$49	<input type="checkbox"/> \$69	Fellow Qty: _____ Member Qty: _____
<u>Regular</u> (February 5 through March 9)	<input type="checkbox"/> No Fee	<input type="checkbox"/> \$59	<input type="checkbox"/> \$79	Non-Member Qty: _____
<u>Late</u> (after March 9)	<input type="checkbox"/> \$79	<input type="checkbox"/> \$79	<input type="checkbox"/> \$99	Subtotal: \$ _____

PAYMENT INFO

CHECK: Made payable to The BADC & enclosed

TOTAL: \$ _____