

INDIVIDUAL SUBSTITUTION FORM

**Please make special note of the important hotel information on page 2 of this form.
Please email completed form to registration@nacds.org or fax to (703) 683-5678.**

Person Completing the Form:

Name: _____ Date: _____

Title: _____

Phone: _____ Ext: _____ Fax: _____

E-mail: _____

Person No Longer Attending This Conference:

Has this person left the company? Yes No

New Registrant Information:

Company: _____

Dr. Mr. Ms. Mrs. First Time Attendee? Yes No

Full Name: _____

Nickname (for Badge): _____

Title: _____

Phone: _____ Ext: _____ Fax: _____

E-mail: _____

Address1: _____

Address 2: _____

City: _____ State/Province: _____

Zip/Mail Code: _____ Country: _____

Spouse/Companion Information:

Spouse/Companion Name: _____

Spouse/Companion Nickname (for badge): _____

Spouse/Companion E-mail: _____

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Website Information:

Selected areas of the Total Store Expo website will be accessible to conference registrants only. This includes a list of participating companies and an advance registration list.

Your login information will be activated once the substitution has been completed and your registration confirmation is sent. Your username is your email address. If you do not know your password, or have not set up a password, you can use the "Forgot Password" function to reset it.

If you have any questions regarding this, please contact the NACDS Registration Department at (703) 837-4300, ext. 2.

Hotel Information:

Please do not use the hotel link in your confirmation email to change the name on the reservation. Complete the below questions and NACDS will make the name change on the reservation for you.

New Registrant Name: _____

Arrival Date: _____

Departure Date: _____

Credit Card Information:

Visa MasterCard American Express Discover

Credit Card #: _____ Expiration: _____

Name on Card: _____

Billing address for card: _____

No hotel refunds will be issued for cancellations and date changes made after Monday, July 17, 2017

Please email completed form to registration@nacds.org or fax to (703) 683-5678.

Need Help?
Please call 703-837-4300
Registration: Extension 2
Housing: Extension 1