

Please print and and fax completed form to 303-258-7377, mail to:  
POD Network / PO Box 3318 / Nederland, CO 80466, or scan and email to:  
podoffice@podnetwork.org

**POD/AAC&U 2015 Organizational Development**  
**Institute Washington, DC | January 20, 2015**

Full Name:

Badge Name:

(first name as you wish it to appear on badge)

Title:

Department/Unit:

Institution/Organization:

Mailing Address:

City:

State/Prov.:

Postal Code:

Country:

Work Phone:

FAX:

Email:

(A valid email address is necessary to receive  
receipt/confirmation/invoice)

**Conference Registration Fees** (All fees are in U.S. dollars):

*Circle one of the following amounts:*

Mailed or faxed by December 5: \$225

Mailed or faxed by December 26: \$245

Mailed or faxed after December 26: \$265

**Circle Method of Payment:** Purchase Order | Check | Credit Card

Charge my: VISA / MasterCard

Card #:

Exp. Date:

Name on card:

**Refund Policy:** A full refund, minus \$25 processing fee, will be made if cancellation is received by December 15, 2014. For questions, dietary concerns, or to pay by credit card over the phone, please contact Hoag Holmgren at podoffice@podnetwork.org