6th Annual Black Doctoral Network Conference

October 25 - 27, 2018 | Embassy Suites by Hilton Charlotte | 4800 S Tryon St, Charlotte, NC 28217 ATTENDEE REGISTRATION FORM

Prefix	First Name Last Name		
	onal Title		
	•	ector, Assistant Coordinator	
Academ	ic Discipline		
Billing A	.ddress		
City		State Zi	p Code
Phone _	Ema	ail	
Name a	s it would appear on the badg	je	
Gender:	Male Female Age: ^	18-25 years old <u> </u> 26-35 year	s old 36-49 years old +50 years old
	Undergrad Student Gra Professional Other	duate/Doctoral Student F	faculty Administrator
		rgraduate Presenter Wo	orkshop Leader Panelist None
			name, institution & abstract title across
	social media? □ Yes	•	
Soloct v	our registration type:		
Select y	our registration type.		
	Registration Type	Early-Bird Registration	General Registration
		Ends June 1, 2018	Begins June 2, 2018
	Member Presenter	□ \$225	□ \$225
	Non-Member Presenter	□ \$250	□ \$250
	Member	□ \$225	□ \$260
	Non-Member	□ \$250	□ \$285
	Groups (3 or more)	☐ \$200/per person	☐ \$240/per person
	Undergraduate Student	□ \$150	□ \$150
	etworking Social Ticket x \$ of all Networking Social Ticket		
Saturda	y Lunch Ticket (hot buffet)	v \$30 00(USD) - \$	
	,		
ivairies (of all Saturday Editor Ticket H	olders (ilicidde yoursell)	
List any			
Total Pa	ayment: \$		
	-	e to Black Doctoral Network)	☐ Visa ☐ MasterCard ☐ Discover
-	umber		
	zation Signature		

Refund Policy: Registration fees are refundable up until Friday, August 31, 2018. No refunds will be granted starting Saturday, September 1, 2018. For group submissions, registration fees are NON-REFUNDABLE, however, if a co-panelist withdraws, the group members can add in a substitute at no additional charge.

Mail completed form to: Black Doctoral Network Inc., 300 Delaware Ave. Suite 210, Wilmington, DE 19801 or send via e-mail to contact@blackphdnetwork.com. You will receive a confirmation email once your form has been processed.