



## University of The Bahamas Education Research Conference

### Registration Form

Please fill out completely

Full Name: \_\_\_\_\_ (Name for badge) \_\_\_\_\_

University/School/Organization: \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Island/State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

#### IN CASE OF EMERGENCY

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Contacts: \_\_\_\_\_

#### 1. CONFERENCE FEES/ INFORMATION

**Registration Fees** (All fees listed in U.S. Dollars.)

**PLEASE CHECK APPROPRIATE REGISTRATION FEE:**

Conference	<input type="checkbox"/> \$200
Student Rate	<input type="checkbox"/> \$100
Day Rate	<input type="checkbox"/> \$100

Groups of 10 or more the 10<sup>th</sup> person free. \$ \_\_\_\_\_  
\_\_\_\_\_ # people in group (each person must fill out a registration form).

If you received a scholarship, check ☐ Do not pay a registration fee. Still complete this registration form.

#### 2. PAYMENT METHOD

<input type="checkbox"/> Cash	<input type="checkbox"/> BSD check payable to the University of The Bahamas
<input type="checkbox"/> Credit Card (Visa or MasterCard)	<input type="checkbox"/> Debit card

Payments may be made in person at the Business Office at the Portia Smith Building or via email by completing the credit card authorization section below and emailing the form along with a copy of the front and back of the Credit Card and a copy of the Credit Card holder's valid government issued identification with signature to [uberconference@ub.edu.bs](mailto:uberconference@ub.edu.bs). A \$40.00 fee will be charged on checks returned by the Bank.

Credit Card Authorization: I hereby authorize the University of The Bahamas to charge the Credit Card as follows:

Credit Card Type: ☐ VISA ☐ MasterCard

Name on Credit Card (Print): \_\_\_\_\_

Payment Amount: \_\_\_\_\_

Credit Card CVV Number: \_\_\_\_\_

Billing Phone Number: \_\_\_\_\_

Signature of Card holder: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

3. **REFUND POLICY:** Fees include a non-refundable administration charge of \$40.00. Cancellation received 7 days or less prior to the Conference will be refunded, less the cancellation fee of \$75.00. Any other emergency requiring cancellation less than five days before the conference will be considered on a case by case basis.

Registration confirmation/receipt and further information will be e-mailed.

**Please mail or fax completed registration form with payment to:**

Phone: (242) 397 2603/2603

Email: [uberconference@ub.edu.bs](mailto:uberconference@ub.edu.bs)

**UBERC Conference**  
**School of Education**  
**University of The Bahamas**  
**P.O. Box N-4912**  
**Nassau, The Bahamas**

AMOUNT COLLECTED \$ \_\_\_\_\_ Business Office Signature \_\_\_\_\_ University Stamp \_\_\_\_\_

Receipt number: \_\_\_\_\_