

November 30 - December 2, 2022

Group Registration Form

Reset Save Print Form

Email this form to register now!

Email: info@SROcongress.com

Please save the filled form on your PC and email as an attachment This form may be copied for additional registrations.

Congress: November 30 - December 1, 2022

Workshop: December 2, 2022

Venue: Las Vegas, NV

Main Group Coordinator Contact Information

Contact person for any questions regarding these registrations

Name _____

Title _____

Email _____

Phone _____ Fax _____

Mobile No. (Optional) _____

School/Organization Details

School _____

Type _____ Number of Students _____

Website _____

Address1 _____

Address2 _____ City _____

State _____ Zip _____ Country _____

Refund Policy, Delegate Cancellations and Transfer

Registration cancellation requests received in writing at least thirty days (30 days) prior to the event will qualify for a full refund less 5% administrative fee. Should the original delegate be unable to attend, a substitute delegate is welcome at **no extra charge**. Any cancellation or substitution requests should be made to **info@SROcongress.com**

Confirmation Details / Shipping Policy

SyllabusX conferences registration is electronic only. No items will ship in hard copy via mail or postal service. After completing registration online or emailing a registration form, you will receive a confirmation email with a summary of your registration details, which we recommend you retain for your own records. Delegates can receive their printed badge upon presenting a valid government-issued ID. If you do not receive an email confirming your registration details two weeks prior to the conference, please contact SyllabusX.

Group Registration Discount: Complimentary Registrations are available for groups of three paid attendees or more from the same organization are available.

Registration Fees are inclusive of program materials, conference breakfast, lunch and breaks.



- 1 for every 4 Paid Registrations
- 2 for every 6 Paid Registrations
- 3 for every 8 Paid Registrations
- 4 for every 10 Paid Registrations

Registration Type		By 7.27.22	Standard	Onsite	Delegates	Total
Academic, Nonprofit & Government Organizations	Conference & Workshop	<input type="checkbox"/> \$1,185	<input type="checkbox"/> \$1,350	<input type="checkbox"/> \$1,425		
	Conference Documentation	<input type="checkbox"/> \$775	<input type="checkbox"/> \$785	<input type="checkbox"/> \$860		
Commercial Registration	Conference Only	<input type="checkbox"/> \$1,895	<input type="checkbox"/> \$1,995	<input type="checkbox"/> \$2,070		
	Conference & Workshop	<input type="checkbox"/> \$2,095	<input type="checkbox"/> \$2,250	<input type="checkbox"/> \$2,325		
					Total Amount for Paid Registrant(s)	

Payment Information

CHARGE (Indicate type) Visa Master Card American Express

Name on Card _____ Security Code _____

Account # _____ Exp. Date _____

Billing Address _____

City _____ State _____ Zip _____

Cardholder Signature _____ Date _____

CHECK is enclosed payable to SyllabusX **MONEY ORDER** is enclosed payable to SyllabusX

PURCHASE ORDER* NO.

Purchase Order must be attached and list all participant(s)

* We accept purchase orders from educational institutions such as Schools, School Districts, Universities, Colleges and Government Institutes.

Billing Organization _____

Attention _____

Billing Email _____ Daytime Phone _____

Signature _____ Date _____

Produced By: SyllabusX, 1900 Campus Commons Dr 100, Reston, VA 20191 , Phone (703) 466-0011

Priority Code SRO-NV



One Pass Gives You Access To All Three Co-located Conferences! Register for any conference and enjoy all-access to every keynote, session, networking event, and exhibitions for all three co-located conferences.

National Student Safety and Security Conference & Workshop

LAS VEGAS, NV NOV 30 - DEC 2, 2022



November 30 - December 2, 2022 Las Vegas

Complete this registration form if you would like to register 5 or more individuals from your school or organization to attend the SRO Congress in Las Vegas.

Group Name _____ Total Number of Registrants _____

Group Registrant Information

Name(s) of Paid Registrant(s)

No.	First Name	Last Name	Title	School/Organization	Email
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

To add more registrants, please copy this page.

Name(s) of Free Registrant(s)

No.	First Name	Last Name	Title	School/Organization	Email
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

To add more registrants, please copy this page.