

Event/Registration Services Information Form

This form <u>must be completed</u> before online registration forms are created. Please allow five to seven business days to set up this form for your event.

Today's Date:				
Your Organization:				
Event Title:				
Event Contact				
Information:				
(Works with Ohio ACTE in	l .			
setting up registration and receives reports etc.)				
receives reports etc.)				
		Event Information		
Event Start:	Day	Time		
Event End:	Day	Time		
Event Location and				
address – include				
link to site if desired				
On Site		site registration?YI		
Registration:	NOTE: Online I	Registration will close one w	veek prior to the event da	ite
Registration Fee:				
Event Registration Po	•			
_		e registration services paper	r registrations are not ac	ccepted. On-site
registration is at the dise	cretion of the event	t organizer.		
Cancellation policy - th	e standard Ohio A	CTE Cancellation Policy ap	plies. There will be a \$15	5 per refund fee
charged to the group for	r processing.			
Please complete the following	lowing, indicating	which services you would li	ke Ohio ACTE to provide	2.
	Reg	gistration Services Req	quested	
Service				
Servio	e	Fee	Yes/No	Comments/Notes
				Comments/Notes
Online Registration Se		Fee \$50	Yes/No MANDATORY	Comments/Notes

INCLUDED

INCLUDED

YES

YES

details

Web Page on www.ohioacte.org with

Event Calendar Link on web site



Service	Fee	Yes/No	Comments/Notes
Processing Fee per Person* (based on registration fee established by division/organization) An additional 6% of total transactions will be added to the fees charged to cover credit card processing, bank fees and processing Initial	Registration Fees/Cost: \$50 or less - \$6 per person \$51 - \$100 - \$10 per person \$101 - \$225 - \$15 per person \$226 - \$299 - \$25 per person \$300+ - \$30 per person	Please select the appropriate registration fee range.	
On Demand Registration Reports (Excel file of registrants – please allow 48 hours to process request)	INCLUDED	YES	
Registrant Invoice and Confirmation Email	INCLUDED	YES	
Nametag/Statement/Invoice/Receipt for Participants ONE FORMAT – NO Customization	\$2.00/each		
Name Badge Holders	\$.55/each		
Ribbons (if in stock)	\$.45/each		
Post Event Evaluation (online) Set-Up Fee -15 questions or less and email delivery of Formatted Evaluation Report.	\$60		

^{*}Unlimited online registrations. Contract negotiations, on-site registration, and other services requested are available at 20% of the total bill.

ACCEPTANCE: Please sign and fax this form to 614-890-1584 or email to membership@ohioacte.org so that we may establish these arrangements on a definite basis. By signing this agreement, the individual agrees to the policies and fee schedule listed here.

Date:_____

AFTER FAXING/EMAILING, please confirm receipt by calling 614/890-2283.