



Disney's Coronado Springs Resort

## REFUND POLICY

Cancellations will be accepted until September 5, 2009, and charged a \$200 administration fee. After September 5, 2009, registrations are non-refundable. A person from the same organization may substitute for a change fee of \$50. No-show registrants will not be refunded.

## SPECIAL SERVICES

HACU and Disney's Coronado Springs

Resort are in compliance with the

Americans with Disabilities Act (ADA). If

auxiliary aids are needed, please submit

written notification to HACU by

September 5, 2009.

## HACU 23rd Annual Conference "Championing Hispanic Higher Education Success: Building a Better Future for All" October 31 - November 2, 2009 Disney's Coronado Springs Resort

Walt Disney World®, FL

Registration Form							
Name	Title						
Organization							
Phone ( )	Fax (						
Mailing Address							
City State Zip							
E-Mail		•					
Please select the one classification below that best describes your primary function: (select only one)  Administrator Faculty Admin/Faculty(Dean,Chair) Staff K-12 Representative							
☐ Undergrad Student ☐ Grad Student ☐ Government ☐ Corporate ☐ Association/Foundation							
Registrati	ion (Check One - Must Be Received	By Listed Dates)					
CATEGORY	EARLY BIRD Until 5/31/09	REGULAR/ON-SITE *  Begins 6/01/09					
HACU National Member Colleges & Univer.	\$550	\$650					
HACU International Member	\$425	\$525					
HACU Faculty/Staff Caucus Member	\$400	\$500					
Non-Member Colleges & Universities	\$675	\$775					
Government Agency	\$550	\$650					
Non-Profit Organizations	\$550	\$650					
Corporate	\$675	\$775					
Presenter	<u> </u>	\$175					
Student Track Participants	\$249	\$299					
K-12 Representative (HSSD)	\$250	\$250					
One-Day Rate (Specify date:)	\$225	\$325					
Latino Higher Education Leadership Institute							
* Registration forms will be accepted at the HACU office until 10/3/09. Thereafter, please register on-site during the conference.  PAYMENT METHOD							
Credit Card: American E	•	□ VISA					
Account #	Exp. Date:						
Name as Appears on Card:							
Signature:							
Signed Purchase Order (No vouchers or re Check Attached (Payable to HACU)	equisitions accepted)						
Please make check payable to HACU and return payment with this form to: HACU 23rd Annual Conference • 8415 Datapoint Drive, Suite 400 • San Antonio, TX 78229							

HACU 23rd Annual Conference • 8415 Datapoint Drive, Suite 400 • San Antonio, TX 78229 \*Faxed forms will be accepted for credit card payments with complete information, including signature.

Fax registration form to (210) 692-0823.

Check this box	if you do not	wish to recei	ve mailings fro	m HACU.

☐ Check this box if you do not wish to receive mailings from HACU sponsors and affiliates.