

CO-HOSTS
National Partnership for New Americans
New York Immigration Coalition



ADVANCING OPPORTUNITY, EQUALITY & JUSTICE
**NEW AMERICAN
DREAMS**
2015 NATIONAL IMMIGRANT
INTEGRATION CONFERENCE

DECEMBER 13-15, 2015
NEW YORK MARRIOTT AT BROOKLYN BRIDGE, NYC
www.NIIC2015.org

REGISTRATION - FOR THOSE PAYING BY CHECK

REGISTRATION TYPE (Select one)

EARLY BIRD Discounted rates available through September 15, 2015
Only checks received by September 15 will be eligible for the Early Bird rates.

3-Day Registration \$435
 1-Day Registration \$160

REGULAR

3-Day Registration \$490
 1-Day Registration \$190

Registration for NIIC 2015 is primarily online through our website NIIC2015.org/registration.

For those who must make a payment by check, this form must be completed for EACH registrant; if you are paying by check for more than 1 registrant, please use multiple copies of this form. Registrations will only be processed upon receipt of full payment.

PAYMENT INFORMATION

Payment amount: _____ Check # _____ Check date: _____ Registration/Promotional Code (if applicable): _____

Total number of registrants for which this check is payment: 1 2 3 More than 3, please specify: _____

Name of individual/organization issuing the check: _____

Billing Address: _____

Checks should be made payable to New York Immigration Coalition with the memo line indicating NIIC 2015 Registration and mailed to:
New York Immigration Coalition, Attn: Sara Rakita, Managing Director, NIIC Registration, 40 Exchange Place, Suite 1820, New York, NY 10005

REGISTRANT INFORMATION

Name: _____

Job Title: _____

Organization/University: _____

Email: _____

Telephone: _____

Address: _____

Have you attended NIIC before: No Yes If yes, how many NIIC's have you attended prior to this year? _____

Have you applied for a scholarship Scholarship applications are online via the NIIC website – NIIC2015.org/registration? Yes No

What sector of the immigrant integration field do you work in (check all that apply):

Academia Advocacy Business Faith-Based Institution Government Labor Philanthropy Service Provider

Other, please specify _____

Do you have dietary restrictions? No Yes, please specify _____

We will accommodate dietary restrictions as much as possible and contact you

Will you need interpretation at NIIC? No Yes, Spanish Yes, ASL Yes, other, please specify _____

NIIC seeks to provide an accessible space but some limitations will apply. We will contact those in need of interpretation.

If you have additional questions about registering by check, please contact Conference Coordinator Cynthia Greenberg at cgreenberg@nyic.org.