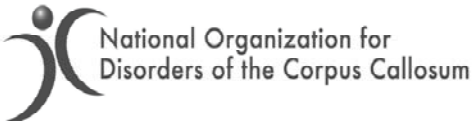


DCC Conference 2010 Registration Form



National Organization for
Disorders of the Corpus Callosum

PMB 363 18032-C Lemon Drive . Yorba Linda . CA . 92886 . USA . EIN 33-1029337
Phone: (714) 747-0063 . Fax: (714) 693-0808 . conference@nodcc.org . www.NODCC.org

Conference Attendee Information:

#1 Adult First Name Adult Last Name DCC T-Shirt Size: Adult S Adult M Adult L Adult XL Adult XXL
Saturday Lunch: Meat Sandwich or Salad
Saturday Dinner: Attending Pizza Party and Dance

#2 Adult First Name Adult Last Name DCC T-Shirt Size: Adult S Adult M Adult L Adult XL AdultXXL
Saturday Lunch: Meat Sandwich or Salad
Saturday Dinner: Attending Pizza Party and Dance

#3 Adult First Name Adult Last Name DCC T-Shirt Size: Adult S Adult M Adult L Adult XL Adult XXL
Saturday Lunch: Meat Sandwich or Salad
Saturday Dinner: Attending Pizza Party and Dance

#1 Child First Name Age Child Last Name DCC T-Shirt Size: Youth S Youth M Youth L Adult S Adult M
 Request Kids & Teens Camp Registration Form
Saturday Lunch: Meat Sandwich or PB&J Sandwich
Saturday Dinner: Attending Pizza Party and Dance

#2 Child First Name Age Child Last Name DCC T-Shirt Size: Youth S Youth M Youth L Adult S Adult M
 Request Kids & Teens Camp Registration Form
Saturday Lunch: Meat Sandwich or PB&J Sandwich
Saturday Dinner: Attending Pizza Party and Dance

#3 Child First Name Age Child Last Name DCC T-Shirt Size: Youth S Youth M Youth L Adult S Adult M
 Request Kids & Teens Camp Registration Form
Saturday Lunch: Meat Sandwich or PB&J Sandwich
Saturday Dinner: Attending Pizza Party and Dance

#4 Child First Name Age Child Last Name DCC T-Shirt Size: Youth S Youth M Youth L Adult S Adult M
 Request Kids & Teens Camp Registration Form
Saturday Lunch: Meat Sandwich or PB&J Sandwich
Saturday Dinner: Attending Pizza Party and Dance

Address City State/Province Zip/Postal Code Country

Home Phone Cell Phone E-mail

(Conference confirmation & additional information will be emailed, not mailed.)

Registration Options

Choose one of the following registration options for each person attending. *No registration fee required for children under the age of 3 years. Childcare IS NOT AVAILABLE for children under the age of 3 years. Join the NODCC now to save on conference registration.*

OPTION 1 (3-Day Conference: Friday, Saturday, Sunday) Registration includes lectures, discussions, Friday dinner, Saturday & Sunday lunch, Saturday evening Pizza Party and Dance, Kids & Teens Camps.

OPTION 2 (2-Day Conference: Saturday, Sunday) Registration includes lectures, discussions, Saturday & Sunday lunch, Saturday evening Pizza Party and Dance, Kids & Teens Camps.

NODCC Membership Discounts on Option 1 Conference Registration Fees

- \$45 Sustaining: 10% discount for one person (\$18.50 savings)
- \$100 Growth: 10% discount for one person (\$18.50 savings)
- \$150 Progress: 15% discount for one person (\$27.75 savings)
- \$250 Momentum: 15% discount for one person (\$27.75 savings)
- \$500 Leadership: 15% discount for two persons (\$55.50 savings)
- \$1,000 Guiding: Free admission for one person (\$185.00 savings)

	# Attending	Option 1 (Early Bird Rate)	Option 1 (After June 1)	Option 2 (Early Bird Rate)	Option 2 (After June 1)		
Adult per person (age 18+)	<input type="text"/>	x <input type="checkbox"/> \$185 USD	<input type="checkbox"/> \$210 USD	<input type="checkbox"/> \$165 USD	<input type="checkbox"/> \$185 USD =	<input type="text"/>	
Teen per person (age 13-17)	<input type="text"/>	x <input type="checkbox"/> \$185 USD	<input type="checkbox"/> \$210 USD	<input type="checkbox"/> \$165 USD	<input type="checkbox"/> \$185 USD =	<input type="text"/>	
Child per person (age 3-12)	<input type="text"/>	x <input type="checkbox"/> \$185 USD	<input type="checkbox"/> \$210 USD	<input type="checkbox"/> \$165 USD	<input type="checkbox"/> \$185 USD =	<input type="text"/>	
						Sub Total =	<input type="text"/>
						Minus Membership Discount =	<input type="text"/>
						Total Amount Due =	<input type="text"/>

Payment Options

All payments must be made in US dollars. We cannot accept checks or money orders drawn from banks outside the U.S.A.

Check or Money Order Enclosed, Payable to: NODCC Visa MasterCard American Express

Cardholder Name

Credit Card Number

Expiration Date

Mail (Credit Card, Check, Money Order): PMB 363 18032-C Lemon Drive . Yorba Linda . CA . 92886

Fax (Credit Card Only): (714) 693-0808

Register Online: www.NODCC.org

Questions: (714) 747-0063 or conference@nodcc.org

For Office Use Only

Date _____ Received _____ Check Code _____ Confirmation Emailed _____

Camp Info Mailed _____ CME _____ Release Signed Camp Registration Received Photos Received

Comments: _____

revised 2.11.10

Cancellation Policy & Liability Release

Please register no later than May 31, 2010 to ensure admission and early bird rate. Registrations must be received in the NODCC Main Office no later than July 19, 2010. Thereafter, registration will be only available at the door for \$275.00 per person and will not include meals. 90% cancellation refund if requested in writing prior to July 19, 2010. 50% cancellation refund if requested in writing between June 15, 2010 and July 1, 2010. No refunds for cancellations received after July 1, 2010.

DCC Conference Participation Waiver of Liability and Hold Harmless Agreement

All attendees are required to sign the following Participation Waiver of Liability and the Photography & Videotaping Release. Parents/Guardians must sign for attendees under age 18. Guardians must sign for attendees over age 18 as applicable.

I / We, the undersigned participant(s), have agreed to participate in the Disorders of the Corpus Callosum ("DCC") Conference 2010 that begins on July 31, 2010 and ends on August 1, 2010. The National Organization for Disorders of the Corpus Callosum, ("NODCC"), a Minnesota non-profit organization headquartered in the State of California, United States of America, is dedicated to working with individuals diagnosed with a Disorder of the Corpus Callosum and their families. This document shall be interpreted under and pursuant to the laws of the State of California.

Knowing, understanding, and fully appreciating all risks, I / We hereby expressly, voluntarily, and willingly assume all risks associated with my participation in the conference, including any and all losses, claims, or actions for any damages, theft, personal injury, sickness, disease, or death. The undersigned will pay any and all judgment decrees and costs, including attorney fees which may be rendered against or incurred by the DCC Conference 2010 organizers, volunteers, agents, exhibitors, vendors or CKE in all actions or proceedings brought or caused by me / us.

The undersigned hereby expressly and unconditionally waives and releases the NODCC and all of its parents, subsidiaries, affiliates and partnerships, and their respective officers, directors, shareholders, partners, agents and employees, and their respective successors, heirs and assigns and each of them (individually and collectively, the "Released Parties") from any and all rights and claims against the NODCC and/or the Released Parties with respect to my participation and involvement in the DCC Conference 2010, including but not limited to any alleged or actual negligence and intentional conduct or omissions to the maximum extent allowed under law. Any dispute or claim in law or equity arising out of this Waiver and Hold Harmless Agreement shall be decided by neutral, binding arbitration, except as provided by California law for judicial review of arbitration. The arbitration shall take place in the County of Los Angeles, State of California, in accordance with the rules of the American Arbitration Association.

Photography, Videotape, Audiotape Release Authorization

I / We, the undersigned participant(s), acknowledge that my / our image(s) may be photographed, videotaped and/or audio-taped during the course of the Disorders of the Corpus Callosum Conference 2010. I / We give permission for my / our photographed and videotaped image(s), audio recorded and printed survey comments during the DCC Conference to be printed, posted and/or published in official publications of the NODCC, including but not limited to directories, brochures, website, announcements, and conference materials.

By signing this document, I / We intend to bind not only myself / ourselves, but also my / our successors, heirs, representatives, administrators, and assigns. Parents/Guardians must sign for attendees under age 18. Guardians must sign for attendees over age 18 as applicable. Agreeing for the Following Family Members:

#1 Adult First Name Adult Last Name

#1 Adult First Name Adult Last Name

#1 Adult First Name Adult Last Name

#1 Child First Name Child Last Name

#1 Child First Name Child Last Name

#1 Child First Name Child Last Name

Personal Name & Contact Information Release Authorization

- I give permission for my name, city, state, country, phone, and email address to be shared with members of the NODCC Community, and provided to newly diagnosed families seeking connections with other families.
- I give permission for our contact information (phone number and email address) to be shared with other conference attendees.
- I am interested in participating in DCC research projects to be conducted during the conference. Please contact me with information.
- I am interested in receiving continuing education units (CEU) for attending the conference. Please send information to me.