

2024 DATAG SUMMER CONFERENCE REGISTRATION FORM
July 10-12, 2024
The Saratoga Hilton - 534 Broadway - Saratoga Springs 12866

First Name _____ Last Name _____
Email _____ Job Title _____
Employer _____ Phone _____
Work Address _____ City _____ State _____ Zip _____

REGISTRATION OPTIONS:

____ Full Conference - \$500 (includes DATAG Annual Membership)
____ Accepted Presenter \$255
(only the main presenter receives this discount, co-presenters must pay the full conference fee)
____ NYSED \$0 (must have nysed email domain)
____ DATAG Board of Directors \$0

Please select the meals you to plan to attend (these are included in your registration fee):

____ Thursday Breakfast ____ Thursday Lunch ____ Thursday Cocktail Reception
____ Friday Breakfast ____ Friday Boxed Lunch

If you have any special needs or dietary restrictions, please note them here:

If you need CTLE credit, please provide: DOB _____ Last for digit of SSN: _____

Cash/Check# _____ Purchase Order# _____ Pending _____

If you do not have a PO# or pending PO# yet – please still complete the form and send it to us for processing. We want to ensure that your registration is processed before the event.

Checks and Purchase Orders should be sent to:

Mail: DATAG - 8 Airport Park Boulevard - Latham, NY 12110
Fax: 518-786-3983 Email: info@datag.org