TRAVEL ASSISTANCE AND REGISTRATION WAIVER

APPLICATION FORM

NC COASTAL RESILIENCE SUMMIT

*June 11&12*

*Havelock Tourist and Event Center*

|  |  |
| --- | --- |
| Title: | First Name: |
| Middle Name: | Last Name: |
| Street Address: | City: |
| State: | Postal Code: |
| Email: | Phone: |
| Affiliation (for name tag): | Title (for name tag): |
| Contact number (in case of last minute event changes): | Meal preference (vegetarian, vegan, gluten-free..): |
| Comments: |  |

What type of assistance are you requesting (check all that apply):

\_\_\_\_ Registration fee waived

\_\_\_\_ Hotel room for June 11

\_\_\_\_ Mileage reimbursement

I hereby certify, by my signature, that the above information is correct and that my employer or place of business does not offer travel reimbursement to cover travel costs and incidentals associated with attending this summit.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date