



All students must be members of NALP to participate in the National Collegiate Landscape Competition. Student membership is complimentary through the school's Student Chapter Membership. Contact NALP at 800-395-2522 for more information.

SCHOOL REGISTRATION

SCHOOL NAME: _____ PRIMARY FACULTY CONTACT: _____
 ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 PHONE: _____ EMAIL: _____
 ADDITIONAL FACULTY CONTACT(S): _____
 ADDITIONAL CONTACT(S) EMAIL(S): _____
 SPECIAL NEEDS: _____

REGISTRATION FEES

Includes the following meals: Wednesday dinner, Thursday lunch and Friday lunch.

STUDENT: # _____ students at \$ _____ = \$ _____

FACULTY: # _____ faculty at \$ _____ = \$ _____

Early Bird (on or before 2/15/24) \$130; Regular (after 2/15/24) \$140

Early Bird (on or before 2/15/24) \$150; Regular (after 2/15/24) \$160

Subtotal Student & Faculty Registration = \$ _____

*Accredited School 20% Discount = \$ _____

TOTAL STUDENT & FACULTY REGISTRATION = \$ _____

OPTIONAL WORKSHOPS: # _____ at \$20 each = \$ _____

TOTAL NCLC REGISTRATION = \$ _____

(STUDENT & FACULTY REGISTRATION AND OPTIONAL WORKSHOPS)

*Accreditation Discount does not apply towards Optional Workshop Fees. Registration and payment must be received by the Early Bird deadline to receive discount.

PAYMENT INFORMATION

CHECK CARD: VISA MasterCard AMEX DISCOVER

Only fill out the below if paying by Credit Card.

CARD NUMBER: _____ EXP: _____ CSC: _____

NAME ON CARD: _____

CREDIT CARD BILLING ADDRESS (if different from above):

CITY: _____ STATE: _____ ZIP: _____

AUTHORIZED SIGNATURE: _____

As a National Collegiate Landscape Competition participant school you are responsible for obtaining waivers from your students certifying to NALP that your students have insurance coverage and that students participating agree that there would be no claim against the equipment manufacturer, dealer, host school or NALP. NALP will contact registered schools with instructions for completing the waiver.

Signed (Faculty Advisor) _____

