

REGISTRATION FORM

[Register Here](#)



or mail to: NHLP, 1663 Mission St., Suite 460, San Francisco, CA 94103

Questions on your registration? Email 2024hjn@nhlp.org.

● Personal Information

Name Pronouns Name on Badge (If Different)

Organization

Mailing Address City State Zip

Phone Email

Years of Housing Experience

Is this your first HJN meeting? Yes No How many have you attended?

Do you require special accommodations? (Please attach a description if needed.)

Access Visual Audio Vegetarian Other _____

● Fees

See page 4 for fee amounts and more information.

Training + Conference Conference Only Training Only

● Payment

If using a credit card, payment must be included at the time of registration. Check or money order payments may be mailed separately.

This payment covers more than one registration. I have attached a registration form for each paid attendee. My payment is based on a discount for _____ (number) of attendees.

I have enclosed a check for \$ _____ made payable to National Housing Law Project.

Please bill my Mastercard/Visa for \$ _____.

Card Number EXP. date (Month/Year)

Name of Cardholder Authorized Signature

Billing Address (Required for Credit Card Orders)