

Conference, Camp & Event Services ***Registration & Payment Site Setup Request*** *Upload the completed form* [*here*](https://und.edu/conferences/und-events.html) *or email it to**UND.conferences@UND.edu**. We require the following information****a minimum of 2 weeks prior****to the date you want your registration site open.* **Please do not submit the form until you have all your information gathered.**

Event Contact:
Contact Email:

**Event Information**Event Title:
Event Date:
Event Timeframe:
Event Location:
Event is: [ ]  In-Person [ ]  Virtual [ ]  Hybrid

Date Registration Site Opens:      ***(We require 2 weeks to process your information)***
Date Registration Site Closes:

**Description of your Event**
*Please provide a brief summary describing your event. This infromation will be listed on the landing page of your registration site.*

**Registration Field Information**
*Please indicate the fields you require for your registration site.*[ ]  Name
[ ]  Date of Birth
[ ]  Title
[ ]  Company/Organization
[ ]  Address
[ ]  City/State/ZIP
[ ]  City/Province/Postal Code/Country
[ ]  Phone
[ ]  E-mail
[ ]  Other – please specify:

**Other Registration Details**
*Please select any other details you need collected on the registration form.*

[ ] Meal Choice:
[ ] Field Trip Options:
[ ] Session Options:
[ ] T Shirt Sizes:
[ ] Special Accommodations:
[ ] Other (please describe):

**Registration Fee Levels**
*Please enter each registration level and price point. Enter a late fee start date and price point, if applicable.*
Level Name:       Price:
Level Name:       Price:
Level Name:       Price:
Level Name:       Price:

**Late Fee**
Start Date:       Amount:       Applies to all levels?

**Capacity**
Is there a maximum number of registrants for any of the registration levels?
Do you want to utilize a waitlist option once the max number above is reached? [ ]  Yes [ ]  No

**Group Registration**Do you want the ability to register more than one person at a time?
*(Example: a parent filling out the form for multiple children at once)* [ ]  Yes [ ]  No

**Discount Code**
*If you need a code to partially/fully waive the fee for any of the levels listed above, please describe.*

**Cancellation Policy**
*Do you have a cancellation policy for your event? If so, please list it below.
(Example: Attendees receive 50% registration fee if cancelled 2 weeks prior to event date)*

**Financial Information**
*Please list funding information for the depositing of your registration revenue.* ***The department is responsible for providing accurate funding information to OEL for the deposit of their funds, as OEL cannot verify your funding information for accuracy****.****(Registration revenue cannot be deposited into a 30000/appropriated or Alumni fund)*** *Please note – credit card processing fees (bank fees) will be charged back to the department on a monthly basis.*

Fund:
Department:
Program:       OR if grant funded, Project:
Account:

**As a standard practice, CCE only accepts online credit card payments.** However, we understand that there may be limited instances that require the option to mail in a check as well.
[ ]  My event requires the option to mail in a check

**Registration Reporting Information**
*CCE will send a registration report twice a week, listing the current registration data received. Please indicate the names and email addresses of the individuals who will receive reports.*Name:       Email:
Name:       Email:       Name:       Email: