



ACPA Registration Transfer Request Form

Only active ACPA members may transfer an Annual Convention registration. This form is used for the sole purpose of transferring registration to an individual with an identical membership type. For example, the current registration holder may have a “general at member institution” membership type, this means the new registration holder must obtain the same membership type. **There will be no exceptions.**

To transfer registration, fax completed form to the Membership Department at 1.202-296-3286.

Current Registration Holder (transferred FROM)

Last/Family Name _____ First/Given Name _____
College/University/Organization _____
Signature of Registrant _____

New Registration Holder (transferred TO)

Last/Family Name _____ First/Given Name _____
College/University/Organization _____
Mailing Address _____
City _____ State/Province _____ Zip/Postal Code _____ Country _____
Phone _____ Fax _____ Primary E-mail _____
ACPA Membership Type _____

Staff Use Only

Verify membership type _____
Membership Exp. Date _____
Staff Initials _____

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