

REGISTRATION FORM

**INTERNATIONAL ACADEMY OF BUSINESS AND PUBLIC ADMINISTRATION DISCIPLINES
(IABPAD)**

Las Vegas Conference

October 24-27, 2021

Last Name: _____ First Name & Middle Initial _____

Organization/Affiliation _____

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Submission Title(s) and Paper Number(s): _____

Appropriate track (s) for your paper _____

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- Each person attending the conference must pay the registration fee.
- Registration fee is US **\$450 by credit card, money transfer, or PayPal (\$425 by check)** per person for one Or two submissions if paid by **February 15, 2021. Each additional submission is \$25.00**
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- Please make your payment payable to **IABPAD** and mail it with the registration form to:
Dr. Raja Nassar, Conference Chair
IABPAD,
P.O. Box 295
Ruston, Louisiana 71273

- Please indicate if you wish to serve as: ___ Discussant ___ Session Chair

If yes, indicate your area of interest _____

- Do you want a vegetarian meal? ___ Yes ___ No

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