

Center/Camp Payment for Attendee(s)

This form is for use by centers/camps to pay the registration fee on behalf of one or more of their staff members attending ProCon 2025.

When this form is submitted, you will receive payment confirmation. The attendees for whom you paid will also each receive an email letting them know you've paid and providing the link to the actual Attendee Registration Form for them to complete.

- If you are an attendee paying at the time you register, please use this Attendee Registration Form instead.
- If you are an attendee whose center/camp is paying on your behalf,please wait for an email confirming your center/camp has paid. That email will have the link to the appropriate registration form.

Visit the ProCon 2025 page in the JCC Resource Center for more details.

For questions or assitance with this form, please contactprocon@jcca.org.

Payee Info

Please share your information with us - the person subehalf you are submitting payment.	ubmitting payment via this form. Later we will ask you on whose
First Name *	Last Name *
Email Address *	Phone Number *
Your Center/Camp	()
The dropdown list is organized alphabetically by state, name. *	/province then by city or camp

ProCon Delegation Best Contact

Who is the best person at your center/camp for JCC A ProCon delegation? *	association to contact with questions about your center/camp
(Me, the person submitting this payment form	
Our CEO/Executive Director (if different)	
©meone else	
First Name *	First Name *
Email Address *	Phone Number *
	()
Title (at the center/camp)*	
Attendee(s) for Whom You are Paying	
Please let us know for how many ProCon attendees you and email address.	ou are paying for at this time, and share each person's name
Note:	
• This form can accommodate payment for up to 15 15 and return to this form to submit attendees 16+.	attendees. If you wish to pay for more than 15, please pay for
 If your delegation size increases in the future, you nattendees. 	nay return to this form and provide payment for additional
Number of attendees you are paying for today: *	
The ProCon 2025 conference fee is \$599.	
Cancellation Terms:	

Cancellation between 29 calendar days pre-ProCon and 15 days pre-ProCon: a refund of 50% of the registration fee

I confirm I have read and accept the ProCon 2025 cancellation terms above.*

Cancellation on or after 14 calendar days pre-ProCon, no refund will be issued.

Roc Con Registration and Cancellation Terms

will be issued.

Confirmation **ATTENDEE 1**: First Name * Last Name * Email Address * **ATTENDEE 2**: First Name * Last Name * Email Address * **ATTENDEE 3:** First Name * Last Name * Email Address * **ATTENDEE 4**: First Name * Last Name * Email Address * **ATTENDEE 5**: First Name * Last Name * Email Address * **ATTENDEE 6:** First Name * Last Name * Email Address * **ATTENDEE 7**: First Name * Last Name * Email Address * **ATTENDEE 8:**

First Name *	Last Name *	Email Address *	

rst Name *	Last Name *	Email Address *	
TENDEE 10:			
rst Name *	Last Name *	Email Address *	
FTENDEE 11:			
rst Name *	Last Name *	Email Address *	
TTENDEE 12:			
irst Name *	Last Name *	Email Address *	
TTENDEE 13:			
irst Name *	Last Name *	Email Address *	
TTENDEE 14:			
irst Name *	Last Name *	Email Address *	
TTENDEE 15:			
irst Name *	Last Name *	Email Address *	
nter the code "Test" folk vo attendees, enter code	owed by the number of Attended	es you entered for full amount off. For e	example

To see your current total, press the Calculate button.

Next >>

