



NATIONAL ASSOCIATION OF POSTAL SUPERVISORS  
**70<sup>TH</sup> NATIONAL CONVENTION**  
AUGUST 9 – 14, 2026  
SAN FRANCISCO MARRIOTT MARQUIS | 780 MISSION STREET | SAN FRANCISCO, CA 94103



## Substitution Request

Please email your completed Substitution Request form to [napshq@naps.org](mailto:napshq@naps.org).  
All requests must be received on or before July 24, 2026.

### ORIGINAL REGISTRANT:

\*First Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Branch #: \_\_\_\_\_

\*Registrant Type (Check One):       Delegate     Auxiliary     Guest

### NEW REGISTRANT:

\*First Name on Badge: \_\_\_\_\_

\*First Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Registrant Type (Check One):       Delegate     Auxiliary     Guest

\*Home Address: \_\_\_\_\_

\*City, State Zip Code: \_\_\_\_\_

\*City Displayed on Badge: \_\_\_\_\_ \*State Displayed on Badge: \_\_\_\_\_

\*Phone #: \_\_\_\_\_ \*Branch #: \_\_\_\_\_

\*Attendee's Email Address: \_\_\_\_\_

(NOTE: *May only be used once to register; non-postal email only*)

Branch Email Address (Optional): \_\_\_\_\_

First Time National Convention Attendee:       Yes       No