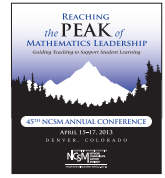


## 45th NCSM Annual Conference Denver, Colorado

**Advanced Registration Deadline: March 18, 2013**



Please use this form to register for the 2013 Annual Conference and to renew your membership. Complete this form and return with payment information. The information you provide will be used by the NCSM office for member communication, mailing lists and the NCSM membership directory.

### Please Print Legibly or Type

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

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

This is my complete address:  Home  Work

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

NCSM sometimes provides its mailing list to outside companies. These companies have been approved by NCSM to send catalogs, publications, announcements, ads, gifts, etc. Please check the box below to be removed from mailing lists. In addition, by checking this box, only your name without contact information will be included in the NCSM directory.

Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

\*Email: \_\_\_\_\_

\*(Registration confirmations will be sent via email)

### MEMBERSHIP

I am a current NCSM Member (as of 4/30/13)  I am not an NCSM Member  I want to renew my NCSM Membership \$85.00

To join NCSM, visit [mathedleadership.org](http://mathedleadership.org) to download an "NCSM Membership Application" and include it with your registration

**Subtotal Membership: \$**

### CONFERENCE REGISTRATION OPTIONS

Full Conference Registration	Advanced Registration Received on or before <b>March 18, 2013</b>	On-Site Registration
<input type="checkbox"/> NCSM Member	\$265	\$305
<input type="checkbox"/> Non-Member	\$375	\$415
<b>One-Day Conference Registration</b>		
NCSM Member <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed.	\$175	\$215
Non-Member <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed.	\$205	\$245
		<b>Subtotal Registration: \$</b> <span style="border: 1px solid black; display: inline-block; width: 50px; height: 20px; vertical-align: middle;"></span>

### MEAL FUNCTIONS / EVENTS

**PLEASE NOTE:** Tickets to each function are limited based on sponsor participation and are given on a first-come, first-served basis

Please indicate the functions/events you wish to attend:	I wish to attend:
Monday Box Lunch	<input type="checkbox"/>
Monday Reception	<input type="checkbox"/>
Tuesday Breakfast	<input type="checkbox"/>
Tuesday Luncheon	<input type="checkbox"/>
Tuesday Reception	<input type="checkbox"/>
Wednesday Breakfast	<input type="checkbox"/>
Wednesday Luncheon	<input type="checkbox"/>

- Purchase orders will be accepted for registration only with a valid P.O. number included on this form.
- Payment is due in full by **March 18, 2013**.
- NOTE: An invoice will NOT be sent.
- **PURCHASE ORDERS ARE NOT ACCEPTED FOR MEMBERSHIP DUES.**

**NCSM Tax ID: 39-1556438**

- Cancellations must be received no later than **March 18, 2013**
  - NCSM will refund registration fees, **less 25%**.
  - **NCSM Membership dues are NOT refundable.**
- Registration and attendance at, or participation in, NCSM's meetings and other activities constitutes an agreement by the registrant to NCSM's use and distribution of the registrant or attendee's image or voice in photographs, videotapes, electronic reproductions and audiotapes of such events and activities.
- Please send registrations to:  
NCSM Office  
6000 E. Evans Avenue, #3-205; Denver, CO 80222  
Ph: 303-758-9611; Fax: 303-758-9616  
Email: [office@mathedleadership.org](mailto:office@mathedleadership.org)

**Total Amount Due:**

### METHOD OF PAYMENT

Visa  MasterCard  Discover  Purchase Order #: \_\_\_\_\_

Check/Money Order (U.S. funds only)

Credit Card# \_\_\_\_\_ Exp: \_\_\_\_ / \_\_\_\_

Cardholder Name: \_\_\_\_\_

Signature: \_\_\_\_\_