2012 NCSM Leadership Academy

"Mathematics Leadership at Work: Moving the Common Core State Standards from Vision to Action"

Registration Form and Information

•••••• PLEASE PRINT LEGIBLY ••••••

You may register for the academy online by visiting mathedleadership.org. You may also register by completing the form below and mailing it to: NCSM Member and Conference Services • 6000 E Evans Ave Ste 3-205 • Denver CO 80222; or faxing it to: (303) 758-9616.

I am registering for the *academy in*:

☐ Pittsburgh PA: June 25–27, 2012 ..... **DEADLINE TO REGISTER IS JUNE 11, 2012^**

☐ Sonoma County CA: July 31–August 2, 2012 ..... **DEADLINE TO REGISTER IS JULY 17, 2012^**

When working in grade-level groups during the Academy, I prefer to focus on *(circle one)*: Gr. K–5 Gr. 6–8 Gr. 9–12

I am *(check one)*: ☐ A Member ☐ A Non-Member

First Name: _____ **Middle:** _____

Last Name: _____

Title: _____

Employer: _____

This is my complete address *(check one)*: ☐ Home ☐ Work

Address 1: _____ **Address 2:** _____

City: _____ **State/Province:** _____

Country: _____

Zip/Postal Code: _____

Telephone: (_____) _____

Fax: (_____) _____

Email: _____

LEADERSHIP IN MATHEMATICS EDUCATION
NCSM NETWORK COMMUNICATE SUPPORT MOTIVATE

I am registering as: ☐ An Individual ☐ A Team Member *(2 or more people make a team)*

Team Name *(if registering as a team)*: _____

Leadership Academy Registration Fees Per Person:

	Early Registration^ (For PA: on or before May 7) (For CA: on or before May 7)		Advance Registration^ (For PA: from May 8 to Jun 11) (For CA: from May 8 to Jul 17)		On-Site Registration^ (based on availability)	
	Member	Non-Member*	Member	Non-Member*	Member	Non-Member*
Individual	$490	$615	$565	$690	$590	$715
Team Member	$450	$575	$525	$650	$550	$675

PAYMENT CALCULATION $ _____ + $ _____ = $ _____

Registration Fee | $85 Member Fee* | Total Amount Due

Method of Payment *(payment must be received prior to attending the Academy)*

☐ **Check/Money Order/Purchase Order:** #: _____

(make payable to NCSM; NCSM is unable to accept Purchase Orders for membership)

☐ **Credit Card:** #: _____ Exp Date: _____

☐ MasterCard ☐ Discover ☐ Visa *(check one)*

Card Holder Name: _____ Card Holder Signature: _____

(please print)

Card Holder Billing Address: *(if different from above)* _____

Address 1: _____ Address 2: _____

City: _____ State/Province: ____ Zip/Postal Code: _____ Country: _____

Important Notes

^ *NCSM academies do fill completely before deadlines, so register promptly. NCSM will accept registrations on a space-available basis. Please contact NCSM Member and Conference Services (303-758-9611) to check availability. It is recommended that you not make any travel arrangements prior to determining space availability and you secure your registration. Registration is not guaranteed until your payment is received.*

* *If you are not an NCSM member or your membership expires at the end of the month of the Academy you are interested in attending, you may pay for an NCSM membership ($85) using this form. Doing so extends your membership another year and you may then register as an NCSM member. Please note: membership fees are non-refundable.*

See mathedleadership.org for additional payment, refund, and cancellation details.

NCSM Federal Tax ID: 39-1556438