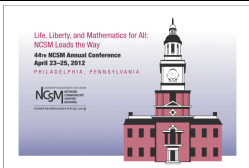
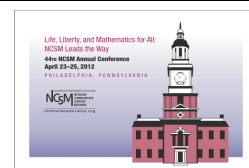


ATTENDEE CONFERENCE REGISTRATION FORM



44th NCSM Annual Conference Philadelphia, Pennsylvania

Advance Registration Discount Ends: **March 30, 2012**



Please use this form to register for the 2012 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.

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.

Please Print Legibly or Type

First Name: _____ Middle: _____

Last Name: _____

Title: _____

Employer: _____

This is my complete address: Home Work

Telephone: _____

Address: _____

Fax: _____

City: _____ State: _____ Zip: _____ Country: _____

*Email: _____

*(Registration confirmations will be sent via email)

MEMBERSHIP

I am a current NCSM Member as of 4/30/12 I am not an NCSM Member I want to renew my NCSM Membership \$85.00

To join NCSM, please complete the "NCSM Membership Application and Order Form" on page 11 and include it with your registration.

Subtotal Membership: \$

CONFERENCE REGISTRATION OPTIONS

Full Conference Registration	Advance Registration Received on or before March 30, 2012	On-Site Registration
<input type="checkbox"/> NCSM Member	\$210	\$250
<input type="checkbox"/> Non-Member	\$320	\$360

One-Day Conference Registration	Member	Non-Member	Member	Non-Member
<input type="checkbox"/> Monday Only	\$120	\$150	\$160	\$190
<input type="checkbox"/> Tuesday Only	\$120	\$150	\$160	\$190
<input type="checkbox"/> Wednesday Only	\$120	\$150	\$160	\$190

Subtotal Registration: \$

NCSM Tax ID: 39-1556438

MEAL FUNCTION / EVENTS

Please indicate which functions/events you will be attending.	I will be attending the following:
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"/>

- **Pre-Registration Deadline: March 30, 2012**
- **Purchase orders will be accepted for registration only with a valid P.O. number included on this form.**
- **Payment is due in full by April 6, 2012.**
- **NOTE: An invoice will NOT be sent.**
- **PURCHASE ORDERS ARE NOT ACCEPTED FOR MEMBERSHIP DUES.**

- Online registration is available at mathedleadership.org.
- Cancellations must be received no later than **March 30, 2012**.
 - NCSM will refund registration fees, **less 25%**.
 - **NCSM Membership dues are NOT refundable.**
- Please send registrations to:
NCSM Member and Conference Services
6000 E. Evans Avenue, #3-205; Denver, CO 80222
Ph: 303-758-9611; Fax: 303-758-9616;
Email: office@ncsmonline.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: _____

For Conference Office Use

Date Received: ____ / ____ / ____ Entered by: _____ Paid: _____ By: _____ Due: _____