

Conference and Workshop Registration Form

2010 Northwest District Teacher's Conference November 3-5, 2010 Seaside, Oregon

Registration for the 2010 Conference covers such items as program, presenter fees, lunch and dinner on Thursday, and mileage equalization (**Mileage equalization:** Please note that mileage equalization is paid only if travel **is greater than a 250 radius** of Seaside, Oregon). A Mileage Equalization Form must be completed to receive compensation. These forms will be available at the conference.



Conference Fees:

Early Bird Registration (*postmarked by September 17, 2010*) \$125.00 per person
 Normal Registration (*postmarked by September 24, 2010*) \$145.00 per person
 Late Registration (*after October 1, 2010*) \$160.00 per person

Box Lunch Choice for Thursday:

"B" Beef Sandwich "H" Ham Sandwich "L" Lactose Intolerant
 "T" Turkey Sandwich "C" 2 Piece Chicken Meal "G" Gluten Free
 "V" Vegetarian Meal "NL" Not Eating Lunch

School Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Email to send future correspondence: _____

Please indicate below (*printing legibly, please*) each staff person's name (*first and last*) and official position title as it should appear on his/her name tag, as well as email address, lunch choice (*options listed above*), and workshop choices with alternate selections (*to prevent overloading our speakers with too many attendees per session*). Continue on the back of this sheet if needed.

STAFF NAME <small>(as it should appear on name tags)</small>	POSITION TITLE <small>(as it should appear on name tags, i.e. "4th Grade Teacher," "Language Arts Teacher," etc.)</small>	EMAIL ADDRESS	LUNCH CHOICE	WORKSHOP Session I: Thursday	2 nd Choice	3 rd Choice	WORKSHOP Session II: Thursday	2 nd Choice	3 rd Choice	WORKSHOP Session III: Thursday	2 nd Choice	3 rd Choice	WORKSHOP Session IV: Friday	2 nd Choice	3 rd Choice
			<small>Letter from above</small>	<small>Workshop #</small>	<small>Alternate #</small>	<small>Alternate #</small>	<small>Workshop #</small>	<small>Alternate #</small>	<small>Alternate #</small>	<small>Workshop #</small>	<small>Alternate #</small>	<small>Alternate #</small>	<small>Workshop #</small>	<small>Alternate #</small>	<small>Alternate #</small>
Please Print Legibly															
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Amount enclosed _____ Please make checks payable to the **Northwest District LCMS Teachers Conference** and send forms and checks to:

Laurie Bredehoft, Administrative Assistant, Education Services –
 Northwest District Office LCMS - 1700 NE Knott Street - Portland, OR 97212

Registration submitted by: _____ Date: _____

**** If conference participants intend to bring spouses or other special guests to the banquet Thursday evening, tickets (\$30.00 each) will need to be purchased PRIOR to the start of the conference. Email LaurieB@nowlcms.org for more info. ****

Registration this year will be done online. This will allow you to register directly for the workshops you wish to attend. You will receive a direct link to the online registration form by email. Mail your payment in to the Northwest District Office upon completing your online registration. Please contact: laurieb@nowlcms.org for any questions regarding registering your school. If you do not have an email address established for your school, please fill out this registration form and mail it, along with your payment, to the District office at the address above by the registration deadline.

