

INDIANA COUNCIL OF TEACHERS OKF MATHEMATICS Registration Form – Annual Conference (November 5-6th, 2017)



IMPORTANT INFORMATION:

- Registrations must be received by Thursday, October 26, 2017
- Purchase Orders are accepted with payer's e-mail address included please send a copy with this form
- All materials (name tag, lunch ticket, program booklet) should be picked up at the registration table when you arrive
- Additional information may be found on ICTM's website <u>www.indianamath.org</u>
- You may photocopy this form as needed please, only one name per registration form
- Requests for sign language interpreting services need to be received by October 6th, 2017

PERSONAL INFORMATION:				
Name (please print or type)				
Home Address				
City	Stat	e	Zip Code	
E-mail	Phone			
School	Grade Level			
REGISTRATION FEE (Check	one, please):			
Registration fee \$120 (1-year ICTM membership and luncheon on Monday is included)				
Full-time undergraduate or full-time graduate registration fee \$40 (luncheon on Monday is included)				
Speaker for this conference - lunch. Lunch can be ordere	•	s waived. Spe	aker registration does I	NOT include
***Registration fees "on-site" and	after October 26 th , 20	17, will be \$1	40 (\$50 for students)	
ICTM conference fee	\$		PAYMENT METHOD (check one):
Lunch (\$20 presenters only)	\$		School check	\$
TOTAL AMOUNT	\$		Personal check	\$
	>		Purchase Order	\$
		TOTAL	AMOUNT ENCLOSED	\$
If paying by P. O., invoices will be	sent to <u>payer's e-mail a</u>	address:		

Return this form with appropriate method of payment made <u>payable to ICTM</u>. Send to:

ICTM, c/o Gina Yoder 9517 Nora Lane Indianapolis, IN 46240