

Conference Registration Form
NYSATE & NYACTE & Task Force for Quality Inclusive Schooling
Fall 2010 Conference

An Inclusive Vision for Teacher Education: Exploring Issues of Engagement
October 21-22, 2010
Gideon Putnam Resort and Spa, Saratoga Springs, NY

Continental breakfast and registration begin at 8:00 am on both days—Opening speakers begin at 9:00 am

Instructions

- Complete this Conference Registration Form.
- Mail form with payment by October 6, 2010.
- Remit completed form and check **payable to SYRACUSE UNIVERSITY** (Federal ID# 15-0532081 to: Iris Maxon, 030 Huntington Hall, Syracuse University, Syracuse, NY 13244-2340)

Registrant Information (please print)

Title (circle one) Dr. Mr. Ms.

First Name _____ Last Name _____

College/University/District Affiliation _____

Street Address _____

City _____ State _____ Zip _____

Email (for conference purposes only) _____

Phone (for conference purposes only) _____

Affiliation (check) NYACTE Institutional Representative NYSATE Member
 TF for Quality Inclusive Schooling Member

Registration and Fees

Fees include registration and meals (Thursday–lunch and dinner / Friday–lunch). Check the day(s) you plan to attend.

Days/Dates	Member Rates	Student and Retired Faculty Rates
Thursday* and Friday (10/21 and 10/22)	<input type="checkbox"/> \$185	<input type="checkbox"/> \$120
Thursday* ONLY (10/21)	<input type="checkbox"/> \$150	<input type="checkbox"/> \$75
Friday ONLY (10/22)	<input type="checkbox"/> \$150	<input type="checkbox"/> \$75
Total Amount Due	\$ _____	\$ _____

*Select your Thursday dinner choice (circle one) Beef Fish

Special Needs

Please indicate any dietary restrictions or other special accommodations you need during the conference.

Hotel Accommodations

Call the Gideon Putnam Resort and Spa (518-584-3000) directly to make your reservations and ask for the NYSATE/NYACTE conference rate of \$106 per night. A limited number of rooms are available at the conference rate until October 1, 2010, and we anticipate a large number of conference participants, **so make your arrangements as soon as possible.**

For more information on Conference Registration, contact Iris Maxon (315-443-1881; or imaxon@syr.edu).
For more information on the Conference itself, contact Dr. Julius Gregg Adams (585-385-7316 or jadams@daemen.edu).

	Office Use Only	
Amount of Payment Received _____	_____	Date Received _____
Cash _____	Check Number _____	