

REGISTRATION FORM

FOR

Strategies for Struggling Learners Conference



Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____ Cell or landline? _____

Job Title _____

Company or School _____

Address _____

City _____ State _____ Zip _____

To obtain your discounted registration rate, you must supply your IDA membership number. If you are unsure of your membership number, please contact cblevins@interdys.org. Please list your membership number: _____. If you are a brand new member and haven't yet received your membership number, just indicate the date you joined.

Which IDA branch are you a member of? _____

Please indicate which of the following best describes you by circling it. Check all that apply to you.

- Adult Dyslexic
- Parent
- Teacher in general education
- Teacher in special education
- Other educator in school system
- Lawyer or Advocate
- S/L Pathologist
- Educational Therapist
- Reading Specialist
- Tutor
- Student
- Other

Do you want to volunteer with our group to help support literacy in San Bernardino, Orange, or Riverside County?

- Yes
- No

What are your areas of interest? _____

How did you hear of this event? _____

Is this your first time at a TCB Conference?

- Yes
- No

Pictures and/or videos may be taken at this event and used for promotional purposes by TCB. TCB has my consent to use these media without any obligation to me.

- I agree

Registration fee _____ (see list below)

How paid? ___ Check # _____

___ Credit Card # _____

Name on credit card _____

Expiration date _____ Billing zip code _____

EARLY BIRD REGISTRATION (until March 1st)

- IDA Members \$ 90
- Others \$135
- Students - Members \$ 65
- Other Students \$ 75

REGULAR REGISTRATION (March 2nd until March 10th)

- IDA Members \$110
- Others \$155
- Students - Members \$ 80
- Other Students \$ 90

Scholarships available - <http://conf.dyslexia-ca.org/2017/pdfs/17-Scholarship-Form-ParentsTeachersLocal.pdf>