

2013 Symposium on Music Teacher Education REGISTRATION

SEPTEMBER 26-28, 2013 • UNIVERSITY OF NORTH CAROLINA AT GREENSBORO

GUEST INFORMATION				Please use a separate form for each attendee. Please type or print clearly.			
FIRST NAME	MIDDLE INITIAL	LAST NAME	ARE YOU MEMBER OF NAFME? <input type="checkbox"/> YES <input type="checkbox"/> NO				
MAILING ADDRESS							
CITY / STATE / ZIP							
TELEPHONE	FAX	EMAIL					
INSTITUTIONAL AFFILIATION				DOES YOUR CAMPUS HAVE A COLLEGIATE-NAME CHAPTER? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A			

REGISTRATION			
EARLY REGISTRATION FEE <i>(Received by August 1)</i>	STANDARD \$195.00	\$	_____ 00
	FULL-TIME STUDENT* \$75.00		_____ .
REGULAR REGISTRATION FEE <i>(Received after August 1)</i>	STANDARD \$215.00	\$	_____ 00
	FULL-TIME STUDENT* \$75.00		_____ .
ON-SITE REGISTRATION FEE	STANDARD \$235.00	\$	_____ 00
	FULL-TIME STUDENT* \$95.00		_____ .
*FULL-TIME STUDENTS MUST SHOW STUDENT ID AT CHECK-IN TO VERIFY STATUS.			

AMENITIES		The registration fee covers the opening keynote speech reception and the closing banquet. Additional guests may accompany registrants to these social portions of the symposium for the costs denoted below.	
Please add _____ guest(s) for the opening reception (\$15 each).	\$		_____ 00
Please add _____ guest(s) for the closing banquet (\$25 each).	\$		_____ 00
GRAND TOTAL:			\$ _____ 00

METHOD OF PAYMENT				Refunds for cancellations will be honored before September 1 <u>less a \$50.00 cancellation fee.</u> No refunds will be issued for cancellations after September 1.			
<input type="checkbox"/> Check (Payable to UNCG. Please mail check with completed registration form.)							
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	ACCOUNT NUMBER	EXP. DATE	3-DIGIT CARD SECURITY CODE			
NAME AS APPEARS ON CARD		BILLING ZIP CODE	AUTHORIZATION SIGNATURE				

<p style="text-align: center;"><i>Mail check (payable to UNCG) or credit card authorization with registration form to:</i></p> <p>Amanda R. Hughes UNC Greensboro School of Music, Theatre and Dance P.O. Box 26170 Greensboro, NC 27402-6170</p>	<p style="text-align: center;"><i>Fax registration form with credit card authorization to:</i></p> <p>ATTN: Amanda R. Hughes, SMTE FAX: (336) 334-5497 PHONE: (336) 334-3638</p>	<p style="text-align: center;"><i>For questions or more information, please contact us at:</i></p> <p style="text-align: center;">smte@uncg.edu <i>or see</i> http://smte.us</p>
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