

Registration Form

The Beauty of Mathematics

Fall, 2010 NATM Conference
Monday, September 20, 2010
Holiday Inn, Kearney NE

Name (as you wish to appear on name badge): _____

School: _____ ESU #: _____

Home Address: _____

City, State, Zip Code: _____

E-mail: _____

Current NATM Member? _____ Yes _____ No

Grade levels you teach: Pre-K K 1 2 3 4 5 6 7 8 9 10 11 12 Special Ed College

Are you involved in the Statewide Grant Session on Sunday, September 19? ___ Yes ___ No

Indicate whether you are attending as a speaker/board member or a participant.

_____ Speaker/NATM Board
Registration fee is waived and meal is on us \$ 0

_____ Participant Registration Fee (includes roll, coffee, lemonade)
Pre-K – 12 and College Teachers \$70, Pre-service Students \$20 \$ _____

Are you eating lunch with us? A traditional country buffet for \$20 \$ _____

LATE REGISTRATION FEE OF \$10 if not postmarked by August 28 \$ _____

TOTAL – make checks payable to NATM \$ _____

Send completed form to Lisa Hamling, 833 South 5th Street, Albion NE 68620 by August 28.

For office use only: Check # _____ P S PO # _____