Registration Form: 2016 California Science Education Conference, Palm Springs (Please type or print neatly.)

To check the status of your membership, the availability of additional fee events, visit **www.cascience.org**. Incomplete forms not accompanied by payment will not be processed. One registrant per form, please. Forms must be received by October 3, 2016 to guarantee pre-registration.

1) REGISTRANT INFORMATION

NAME _____

ADDRESS _____
Home Business

CITY, STATE ZIP _____ COUNTY _____

EMAIL* _____

**By providing your email address, you are consenting to be communicated with electronically by CSTA. Your consent may be revoked by notifying CSTA.*

HOME PHONE _____ WORK PHONE _____

SCHOOL DISTRICT _____ SCHOOL _____ GRADE _____

EMERGENCY CONTACT NAME & PHONE _____

☐ Special need request. Must register by October 3. *(Includes dietary, ADA, nursing mom, etc.)*

2) MEMBERSHIP

1 Year ($50) 2 Years (New Teacher $50) 3 Years ($120) Lifetime ($500) Preservice ($25) $ _____

3) REGISTRATION

Includes access to workshops, exhibit hall, general sessions, and focus speakers on the days you are registered.

Registration Type	On-site After 10/3	
CSTA Members *(paid through 11/1/16 or later)*		
Full Registration (Fri.-Sun.)	$175	$_____
Weekend Only (Sat. & Sun.)	$150	$_____
Preservice Full Registration (Fri.-Sun.)	$100	$_____
Preservice Weekend Only (Sat. & Sun.)	$50	$_____
Nonmembers		
Full Registration (Fri.-Sun.)	$228	$_____
Weekend Only Registration (Sat. & Sun.)	$205	$_____
Guests		
Guest (Fri.-Sun.)		$_____
☐	$105	$_____

4) TICKETED EVENTS

Short Courses: Course # _____ Fee _____ Course # _____ Fee _____ Course # _____ Fee _____ Total $ _____

Field Courses: Course # _____ Fee _____ Course # _____ Fee _____ Course # _____ Fee _____ Total $ _____

Awards Lunch – Brian Reiser: #Attending _____ $46 per person Total $ _____

Friday STEM Pool Party: #Attending _____ $10 per person Total $ _____

Saturday Evening – Casino Night: #Attending _____ FREE Total $ _____

Opt Out – Help CSTA reduce waste on-site:

I do NOT need a printed Program Book. I will use the Conference App.

I do need a printed Program Book.

TOTAL $ _____

5) PAYMENT INFORMATION

(Payment may be made by check, purchase order, Visa, MasterCard, American Express or Discover.)

Check/P.O. enclosed (payable to CSTA) Check/P.O # _____

Charge My Visa MasterCard AMEX Discover Account # ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Name on Card _____

Billing Address *(if different than above)* _____

City/State/Zip _____

Signature _____ Security Code _____ Exp. Date _____

Mail or fax registration with payment to CSTA at: 950 Glenn Drive, Suite 150, Folsom, CA 95630 or Fax (916) 932-1954

By registering for the 2016 California Science Education Conference, you agree to the Registration Terms and Conditions provided in this brochure.