



2012 National Reading Recovery & K-6 Classroom Literacy Conference Approval Form

DO NOT MAIL THIS FORM – REGISTRATION IS ONLINE ONLY

Please use this form for payment approval purposes. Register online at:
www.rrcna.org/conferences

Registration is online only. Payment is accepted online by credit card, purchase order, or check. Note: If payment type is with a purchase order or by check, payment must be received (by mail, fax) in the registration office within 10 days after you register online. **Your registration will not be confirmed until your purchase order or check has been received.** Credit card payments are confirmed immediately after payment has been processed. Mail or fax purchase order or mail check to: **RRCNA National Conference, 500 W. Wilson Bridge Rd., Suite 250, Worthington, OH 43085 OR fax to 614-985-3736. Fed ID #31-1429018.**

For registration questions, such as where to mail your conference fees, invoice or payment information, or to make a change to an existing registration, please call (866) 458-8521 or email conference@dpmanagement.net.

NATIONAL READING RECOVERY & K - 6 CLASSROOM LITERACY CONFERENCE FEES

Saturday, February 4: Preconference Institutes and Sunday, Feb. 5 - Tuesday, Feb. 7: Full Conference

Full registration includes admission to the Conference and all general and concurrent sessions held February 5 – 7, 2012. Preconference Institutes are held on February 4 and are **not** included in the Full Conference registration fee. Note: Some Preconference and Featured Speaker sessions are restricted to Reading Recovery trained professionals only.

SATURDAY PRECONFERENCE INSTITUTE FEES (includes lunch)

Saturday, February 4, 2012, 9:00 am – 3:30 pm

	RRCNA Member Rate	Non-Member Rate
Early Registration: If submitted by December 1, 2011:	\$185	\$235
Regular Registration: If submitted after December 1, 2011:	\$220	\$270

CONFERENCE REGISTRATION FEES - PLEASE INDICATE YOUR CHOICE

Sunday, February 5 – Tuesday, February 7, 2012

Early registration applies only to forms submitted **BY DECEMBER 1, 2011**

	Early Rate	Regular Rate
Full Conference	\$390*	\$440*
Sunday Only	\$280*	\$335*
Sunday/Monday	\$345*	\$395*
Monday/Tuesday	\$345*	\$395*
School Administrators Institute	\$280*	\$335*

***SUBTRACT \$50 if you are a RRCNA MEMBER**

RRCNA MEMBERSHIP FEES \$60 to join or renew
\$40 in-training or retired members

TOTAL \$ _____

CANCELLATIONS AND REFUNDS

Refunds will be given if written notice is postmarked by December 15, 2011. There will be a \$50.00 accounting charge for all refunds. Please note that submission of this registration form is a commitment to pay if the Conference is held, regardless of weather conditions. No-shows will be invoiced and subject to collections for the full amount. Unpaid registrations (including no-shows) will necessitate barring registration for future Reading Recovery Conferences, Academies, and Institutes sponsored by RRCNA. **Refunds will not be given after December 15, 2011. You may transfer your registration to another person if you notify the Registration Office at 866-458-8521 or 614-985-3648 or by email to conference@dpmanagement.net.**

Payment Information

Billed purchase order: If you are paying by purchase order, in order to obtain the early rate we must receive your employer's purchase order by Dec. 1, 2011. After your employer's purchase order has been received by the RRCNA registration office, an invoice will be sent. Upon receipt of this invoice, your employer must issue a payment for your registration. Please note: if you use a school purchase order (payable to RRCNA), you must comply with RRCNA payment terms. **Mail purchase order or check to:** RRCNA National Conference, 500 W. Wilson Bridge Rd., Suite 250, Worthington, OH 43085 OR fax purchase order to 614-985-3736.

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Register at: www.rrcna.org/conferences

WHEN YOU COMPLETE YOUR REGISTRATION ONLINE, THIS IS THE INFORMATION YOU WILL NEED:

If you are an RRCNA Member, please enter your membership #: _____ go to: www.rrcna.org to look up your membership number.

Name (First, MI, Last) _____ First Name (for badge) _____

This is my first conference ___yes ___no

Organization _____

Preferred mailing address _____

Work phone () _____ *Attendee's Email: _____

Home phone () _____ Secondary Email Address: _____

***Please provide the attendee's email address on the registration form. You will be emailed a link with a code that will allow you to register and make your session selections.**

I am a:

RR/DLL Teacher	K-2 Classroom/Title I Teacher	Curriculum Specialist
RR/DLL Teacher Leader	3-6 Classroom/Title I Teacher	School Administrator _____
RR/DLL Trainer	Literacy Coach/Coordinator	Other _____
RR Professional-In-Training	Superintendent	
RR Site Coordinator	Principal	

Conference package:

____ Full Conference (Sun – Tues) ____ Sunday/Monday ____ School Administrators
____ Sunday Only ____ Monday/Tuesday Institute (Monday Only)

Special needs:

Vegetarian meals _____ Special physical requirements _____

Amount of payment \$ _____ (U.S.) **Make checks and POs payable to RRCNA.**

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Please note that submission of this registration form is a commitment to pay the registration fee in full by Dec. 1, 2011. The Conference will be held, regardless of weather conditions. Refunds will not be given after Dec. 1, 2011. You may transfer your registration to another person if you notify the Registration Office at 866-458-8521 or 614-985-3648 or by email to conference@dpmanagement.net.

INFORMATION NEEDED FOR PAYMENT BY PURCHASE ORDER: PO number _____

Responsible for payment ORGANIZATION CONTACT PERSON E-MAIL ADDRESS

Billing address ADDRESS CITY STATE ZIP PHONE NUMBER

Credit Card: Visa MasterCard American Express Discover Card

Account number Expiration date Security Code

Cardholder's billing address CITY STATE ZIP

Cardholder's name _____

Mail payment to: RRCNA National Conference, 500 W. Wilson Bridge Rd., Suite 250, Worthington, OH 43085; or **fax purchase order to:** 614-985-3736.