



## Creating A Masterpiece: A Confident, Thinking Child

### REGISTRATION FORM

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 E-mail \_\_\_\_\_

Check All That Apply:  Pre-K Teacher  Kindergarten  Head Start  Public School  Faith Based  Child Care Provider  
 Center  Home  Administrator/Director  Advocate  First Class Pre-K Teacher  Other \_\_\_\_\_

#### SPECIAL NEEDS

Equal Access  Special Diet

Please Explain \_\_\_\_\_

#### CONFERENCE FEES

	Early Bird By 3/19/12	Regular After 3/19/12	On-Site	
Pre-Conference Wednesday ~ lunch included	\$85	\$115	N/A	\$ _____
Conference Thursday & Friday	\$150	\$175	\$200	\$ _____
Special Event ~ Awards Luncheon – Participants	\$35	\$35	N/A	\$ _____
Non-Participants	\$45	\$45	N/A	\$ _____
<b>Total Conference Fees</b>				\$ _____

#### WORKSHOP SESSIONS

<i>Seating is limited. Choose a 1<sup>st</sup>, 2<sup>nd</sup>, &amp; 3<sup>rd</sup> choice. Write the course number for the workshops in each</i>	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
Wednesday, 4/18/2012 – Pre-Conference			
Thursday, 4/19/2012 – Opening – 9:00am – 10:30am			
Thursday, 4/19/2012 – Session I – 10:45am – 12:15pm			
Thursday, 4/19/2012 – Session 2 – 2:00pm -3:30pm			
Thursday, 4/19/2012 – Session 3 – 3:45pm – 5:15pm			
Friday, 4/20/2012 - Session 4 - 8:30am - 10:00am			
Friday, 4/20/2012 - Closing Session - 10:15am - 12:15pm			

- All conference fees are non-refundable.
- On-site registration will be available only if workshops are not filled.
- Register early to receive your preferred workshop selections. Registration must be paid to secure selections.

#### PAYMENT METHOD

**Make all checks payable to: AL Pre-K Conference**

Credit Card:  VISA  MasterCard  American Express  Discover  Check  Purchase Order

Credit Card/Check/PO #: \_\_\_\_\_ Exp Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Zip: \_\_\_\_\_ Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Register online at: [condorregistration.net/apc](http://condorregistration.net/apc), by fax to: 256-852-6838, or mail to: APC, c/o CONDOR Registration, P.O. Box 3348, Huntsville, AL 35810

**Questions:** Call 256-852-4490 or email [apc@condorregistration.net](mailto:apc@condorregistration.net)