



**INDIANA COUNCIL OF TEACHERS OKF MATHEMATICS**  
**Registration Form – Annual Conference (November 5-6<sup>th</sup>, 2017)**



**IMPORTANT INFORMATION:**

- Registrations must be received by Thursday, October 26, 2017
- Purchase Orders are accepted with payer’s e-mail address included – please send a copy with this form
- All materials (name tag, lunch ticket, program booklet) should be picked up at the registration table when you arrive
- Additional information may be found on ICTM’s website [www.indianamath.org](http://www.indianamath.org)
- You may photocopy this form as needed – please, only one name per registration form
- Requests for sign language interpreting services need to be received by October 6<sup>th</sup>, 2017

**PERSONAL INFORMATION:**

Name (please print or type) \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

School \_\_\_\_\_ Grade Level \_\_\_\_\_

**REGISTRATION FEE (Check one, please):**

\_\_\_\_ Registration fee **\$120** (1-year ICTM membership and luncheon on Monday is included)

\_\_\_\_ Full-time undergraduate or full-time graduate registration fee **\$40** (luncheon on Monday is included)

\_\_\_\_ Speaker for this conference – your conference fee is waived. Speaker registration does NOT include lunch. Lunch can be ordered for **\$20**

**\*\*\*Registration fees “on-site” and after October 26<sup>th</sup>, 2017, will be \$140 (\$50 for students)**

ICTM conference fee \$ \_\_\_\_\_

Lunch (\$20 presenters only) \$ \_\_\_\_\_

**TOTAL AMOUNT** \$ \_\_\_\_\_

**PAYMENT METHOD (check one):**

School check \$ \_\_\_\_\_

Personal check \$ \_\_\_\_\_

Purchase Order \$ \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** \$ \_\_\_\_\_

If paying by P. O., invoices will be sent to payer’s e-mail address: \_\_\_\_\_

Return this form with appropriate method of payment made payable to ICTM. Send to: **ICTM, c/o Gina Yoder**  
**9517 Nora Lane**  
**Indianapolis, IN 46240**