



# 2018 Institute for Middle Level Leadership

## Location

June 17–20, 2018—Hilton Head, SC *Deadline: June 1, 2018*

June 24–27, 2018—San Diego, CA *Deadline: June 8, 2018*

One form per registrant. Form may be duplicated. Please type or print clearly and keep a copy for your records.

### 1 Registrant Information \*REQUIRED

\*First Name \_\_\_\_\_ \*Last Name \_\_\_\_\_

\*Email \_\_\_\_\_

AMLE Membership # \_\_\_\_\_

\*School/Organization \_\_\_\_\_

\*Address \_\_\_\_\_

home  work (Use work address if purchasing an institutional membership.)

\*City \_\_\_\_\_ \*State/Province \_\_\_\_\_

\*Zip/Postal Code \_\_\_\_\_ Country (if not U.S.) \_\_\_\_\_

\*Phone ( \_\_\_\_\_ ) \_\_\_\_\_

home  cell  work

Fax ( \_\_\_\_\_ ) \_\_\_\_\_

By registering for 2018 Institute, you grant permission for your voice and image to be used in digital form, in print, and by other means by the Association for Middle Level Education (AMLE) and you waive any rights of compensation or ownership thereto.

Please complete this important information:

**Professional Position:** (choose one)

- Principal  Asst. Principal  Teacher  Library/Media Specialist
- Central Office  Curriculum  Guidance/Advisory  State Dept of Education
- Technology  University Professor  Superintendent/Asst. Superintendent

Years Taught \_\_\_\_\_ Grade(s) \_\_\_\_\_ Subject(s) \_\_\_\_\_

Check here if this is your first AMLE Institute for Middle Level Leadership.

**How did you hear about the institute?** \_\_\_\_\_

Include two objectives you'd like to accomplish by attending the Institute

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_

Check here if you don't want your postal address shared with our conference partners

Dietary Restrictions? \_\_\_\_\_

Check here if you have any special needs or a disability that requires special assistance.

Need: \_\_\_\_\_

### 2 AMLE Membership Not an AMLE member?

Join now and save instantly on your registration! If joining, be sure to select AMLE member rate.

#### Individual

Professional . . . . . \$49.99

Student Membership. . . . \$24.99

#### School

School Membership . . . . . \$249.99

(Covers entire building. Contact AMLE about adding all your staff members.)

**A Total AMLE Membership \$**

### 3 Registration Rates

Postmarked BY April 27, 2018    Postmarked AFTER April 27, 2018

AMLE Professional Member **\$995** **\$1,195**

Non-Member & Associate Member\* **\$1,195** **\$1,395**

\* Includes an AMLE Professional Membership and print copies of each of our magazines

QUESTIONS? Contact Chuck Pletcher (cpletcher@amle.org)

**B Registration \$**

### 4 Payment Complete payment must be received with registration form.

**Total Payment A + B = \$**

Check—Payable to AMLE in U.S. funds. (*\$25 fee for returned checks*)

Purchase Order enclosed. PO# \_\_\_\_\_

Visa  MasterCard  American Express  Discover

Card # \_\_\_\_\_

Exp. Date (MMYY) \_\_\_\_\_ CSV# \_\_\_\_\_

Cardholder Name (please print) \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Review registration, cancellation, and substitution policies online at [www.amle.org/leadership](http://www.amle.org/leadership)  
Individual registration cancellations must be made in writing by registration deadline.  
A \$200 processing fee will be assessed. No refunds will be issued after the registration deadline.

### 5 ways to register:

**Web:** [www.amle.org/leadership](http://www.amle.org/leadership)

**Email:** [membercenter@amle.org](mailto:membercenter@amle.org)

**Fax:** 614-895-4750

**Phone:** 1-800-528-6672

**Mail:** 4151 Executive Parkway, Suite 300, Westerville, Ohio 43081