



# AMLE2018

ATTENDEE

## Annual Conference for Middle Level Education

Orlando, FL • October 25–27, 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 AMLE2018, 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 Annual Conference.

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

Check here if you are interested in facilitating a session. A representative will contact you with details. Visit [www.amle.org/annual/facilitator](http://www.amle.org/annual/facilitator) for more information

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

#### 3-Day Rate

	Thru Aug 10	Thru Sept 28	After Sept 28
<input type="checkbox"/> Member	\$399	\$499	\$549
<input type="checkbox"/> Non-Member & Associate Member*	\$474	\$574	\$624
<input type="checkbox"/> Student Member	\$199	\$249	\$249
<input type="checkbox"/> Student Non-Member*	\$249	\$299	\$299
<input type="checkbox"/> Teams**	<b>Every fifth person is FREE!</b>		

#### 1-Day Rate

	Thru Aug 10	Thru Sept 28	After Sept 28
<input type="checkbox"/> Member <small>(must be/become professional or school member)</small>	\$199	\$299	\$349

(Please select the day)  Thursday  Friday  Saturday

\* Includes an AMLE membership (does not include print copies of our magazines).

Students: Rate also requires facilitation of 2 sessions. Facilitator information available at [www.amle.org/annual/facilitator](http://www.amle.org/annual/facilitator)

\*\*Teams: Free registrations are at equal or lesser value. Registration forms and complete payment must be submitted together. ANY QUESTIONS?: Contact Chuck Pletcher (cpletcher@amle.org)

**B Total Registration Fees \$** \_\_\_\_\_

### 4 Ticketed Options ALL TICKETED EVENTS take place on Saturday, Oct. 27, 2018

**CMLA Summit** . . . . . \$25  
Only with purchase of AMLE2018 conference registration.

**Affiliate Meeting** . . . . . \$25  
Only with purchase of AMLE2018 conference registration.

**C Total Ticketed Option \$** \_\_\_\_\_

### 5 Promo Code

# \_\_\_\_\_ **D Discount Amount \$** \_\_\_\_\_

Promo codes only valid at time of registration.

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

**Total Payment A + B + C + D = \$** \_\_\_\_\_

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/annual/registration](http://www.amle.org/annual/registration)  
Individual registration cancellations must be made in writing by **October 12, 2018**. A \$100 processing fee will be assessed.  
Ticketed options are non-refundable unless entire registration is cancelled. No cancellations accepted for any one registered as a team or large group. Substitutions suggested.