



2009 NYSSCA Conference Registration Form

"School Counselors: Finding Ways to Make a Difference"

October 23-24, 2009

Pre-Conference is October 22, 2009
The DoubleTree Hotel Syracuse
PLEASE PRINT CLEARLY!

- One registration form *per person*. This form must be accompanied by full payment or purchase order.
- **No refunds** unless requested in writing prior to 10/2/2009. You may substitute a colleague by 10/12/2009.
- Mail completed registration form with full payment by check OR *authorized* purchase order to:
NYSSCA; P.O. Box 217; Leicester, New York 14481: Attention Registration Chair
- Checks and purchase orders must be payable to **NYSSCEF, INC.**
(New York State School Counselors Education Foundation, Inc.)

FIRST NAME _____ LAST NAME _____

Email address*: _____

*Required for confirmation

► Are you currently a NYSSCA Member?* Yes No ► ASCA Member? Yes No

*NYSSCA Membership must be current through October 2009 to qualify for membership rate.
Check your renewal date when signing in on our website OR email inquiries to membership@nyssca.org

► PREFERRED mailing address: School/Work (Include school name) Home

- If work: School: _____
- Street address: _____
- City/town: _____
- State: NY or _____ ZIP: _____ Region/County: _____
- Telephone: (include area code) _____

► Position Title: _____

► Elementary Middle School High School Administrator Director Grad Student Counselor Educator

► Are you a first time conference attendee? Yes No

► Are you attending the College Tours on Thursday afternoon? Yes (see website for information) No

► Registration type – check one

Registration includes meals and conference materials (hotel is separate)	NYSSCA Member	Non-Member	Graduate Student	Presenter
Early Bird Registration <i>-postmarked by 9/30/09</i>	<input type="checkbox"/> \$230.00	<input type="checkbox"/> \$280.00 <i>Includes 1 year membership</i>	<input type="checkbox"/> \$200.00 <i>Includes 1 year membership</i>	<input type="checkbox"/> \$200.00 <i>Attending the whole conference</i>
Regular/On-Site Registration	<input type="checkbox"/> \$255.00	<input type="checkbox"/> \$305.00 <i>Includes 1 year membership</i>	<input type="checkbox"/> \$225.00 <i>Includes 1 year membership</i>	<input type="checkbox"/> \$225.00 <i>Attending the whole conference</i>
Friday Only	<input type="checkbox"/> \$130.00 <i>Does not include Awards Banquet</i>	<input type="checkbox"/> \$180.00 <i>Does not include Awards Banquet</i>	<input type="checkbox"/> \$100.00 <i>Does not include Awards Banquet</i>	<input type="checkbox"/> \$100.00 <i>Attending day only/ No Awards Banquet</i>
Saturday Only	<input type="checkbox"/> \$130.00	<input type="checkbox"/> \$180.00	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$100.00 <i>Attending the whole day</i>
**NYSSCA/NYIT Course- Early Bird- PM by 9/30/09	<input type="checkbox"/> \$325	<input type="checkbox"/> \$375 <i>Includes 1 year membership</i>	<input type="checkbox"/> \$295 <i>Includes 1 year membership</i>	
**NYSSCA/NYIT Course On Site Conf. Registration	<input type="checkbox"/> \$350	<input type="checkbox"/> \$400 <i>Includes 1 year membership</i>	<input type="checkbox"/> \$320 <i>Includes 1 year membership</i>	
Volunteers	<input type="checkbox"/> \$115.00 for conference APPROVED ONLY (Does not include Awards Banquet)			

**See Enclosed Flyer which describes the NYSSCA/NYIT Course and Credit Options-Course Registration Deadline 9/30/09

- I am a Presenter who will only attend my scheduled presentation (no fee).

TOTAL PAYMENT ENCLOSED \$ _____ Check # _____ P.O. # _____
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- Conference and hotel information at www.nyssca.org and www.syracuse.doubletree.com
- Make room reservations directly with the Doubletree Hotel Syracuse 315-432-0200 or 800-222-TREE
- Send registration questions to: information@nyssca.org