

GROUP REGISTRATION FORM (for 5 or more attendees)

NCTM 2018 Annual Meeting • April 25–28 • Washington, DC

Early-Bird Discounts End March 23, 2018 • Registration Ends April 24, 2018

1 Coordinator's Information *Required Information

First Name* _____
 Last Name* _____
 Home Institution _____
 Address* _____
 City* _____
 State/Prov* _____
 ZIP/PC* _____ Country* _____
 E-mail* _____
 Phone _____

NCTM offers discounts for **groups of 5** or more attendees for the full conference, registering at the same time using one form of payment, with confirmations being sent to one mailing address. Please note that the Coordinator listed below will be responsible for receiving and distributing the confirmations and badges for the group. If a purchase order is being used, a copy must be attached to your online registration or sent by mail or fax with your registration form to ensure accuracy.

How to Register/Questions?

Online: www.nctm.org/annualreg
Mail: NCTM Conference Registration
 P.O. Box 844277
 Dallas, TX 75284-4277
Phone: (855) 720-8053 (toll-free) OR (514) 798-1934 (int'l)
 M–F 8:30 a.m.–5:30 p.m. ET
Fax: (888) 289-9844 (toll-free) OR (514) 289-9844 (int'l)
Email: nctmannualmeeting@showcare.com

2 Attendee Information (for 5 or more attendees; add sheets as needed) Member number required for **Member** Registration.

	Member <small>\$345 thru 3/23 \$378 after 3/23</small>	NonMember* <small>\$430 thru 3/23 \$463 after 3/23</small>	Preconference Workshops (4/25)	MET Reception	Prof** & Grade*** Levels
Mbr # _____ Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1: Social Justice	<input type="checkbox"/>	_____
Address _____			<input type="checkbox"/> 2: Implementing 8 Practices		_____
City _____ State _____ ZIP _____			<input type="checkbox"/> 3: Multi-Tiered Systems		_____
*NonMember Select: <input type="checkbox"/> Teaching Children Mathematics <input type="checkbox"/> Mathematics Teaching in the Middle School <input type="checkbox"/> Mathematics Teacher <input type="checkbox"/> I do not wish to receive mbrshp & journal					
Mbr # _____ Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1: Social Justice	<input type="checkbox"/>	_____
Address _____			<input type="checkbox"/> 2: Implementing 8 Practices		_____
City _____ State _____ ZIP _____			<input type="checkbox"/> 3: Multi-Tiered Systems		_____
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*NonMember Select: <input type="checkbox"/> Teaching Children Mathematics <input type="checkbox"/> Mathematics Teaching in the Middle School <input type="checkbox"/> Mathematics Teacher <input type="checkbox"/> I do not wish to receive mbrshp & journal					

****Professional Level:** Experienced Teacher, Early Career Teacher, Administrator, Coach/Coordinator, Math Specialist, University/College Professor, Student/Preservice, Consultant, Retired

*****Grade Level:** PK-2, 3-5, 6-8, 9-12, Higher Ed

3 Subtotals & Total Payment

Apply Early-Bird Registration Rates

Total (of All Pages) Member Meeting Registrations	\$ _____
Total (of All Pages) Nonmember Meeting Registrations	\$ _____
Total (of All Pages) Workshop Registrations	\$ _____
Total Payment in U.S. \$	\$ _____

All payments must be submitted in U.S. dollars drawn on U.S. bank accounts, money orders, or credit cards. If paying by credit card, billing will be subject to the appropriate exchange rate. Approved purchase orders are accepted—please submit a scanned/electronic copy with your online or e-mailed registration, or mail/fax a copy with your registration form.

Cancellation requests must be received in writing on or before March 23, 2018. NCTM will issue a full refund minus a \$50 cancellation fee for members, nonmembers, and each person affiliated with a group. In addition, a \$50 cancellation fee will be charged for preconference workshop registrations. Substitutions will be accepted via email, letter, and onsite registration. Refer to nctm.org/annualreg for the full cancellation policy.

Attendees with special needs, as defined by ADA, should send your requests by e-mail to conferencedept@nctm.org. To ensure your request is fulfilled, please send the request before March 23, 2018.

Check here to be removed from rental lists. If you do not check this box, contact information, including email addresses, may be included in a rental list.

4 Method of Payment

Check (made payable to NCTM) Money Order P.O. # _____
(for conference registration)

Visa MasterCard American Express

Card Number _____

Exp. Date _____

Billing Address _____

Print Name _____

Signature _____

Date _____