

DREAMCATCHING 2007 REGISTRATION FORM

Name:

School/Organization:

Address:

City:

Province/State:

Postal/Zip Code:

Phone:

Fax:

E-mail:

Position:

- Secondary Science / Math Teacher
- Middle School Science / Math Teacher
- Primary Science / Math Teacher
- Guidance Counselor
- Principal
- Consultant. If yes, which subject(s)
- Other. Please specify.

Special Needs: (Food allergies, mobility issues, etc.)

Workshops

Workshop enrolment will be limited to a maximum of 30 people per session (3 sessions in each topic area will be held during the conference). Please indicate your preference of workshop, by ranking them from 1 - 8. Every effort will be made to respect your order of preference, but assignments will be made on a first-come, first-served basis.

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|--|--|--|---|
| <input type="checkbox"/> Primary Math | <input type="checkbox"/> Middle School Math | <input type="checkbox"/> Secondary Math | <input type="checkbox"/> Integrating IT |
| <input type="checkbox"/> Primary Science | <input type="checkbox"/> Middle School Science | <input type="checkbox"/> Secondary Science | <input type="checkbox"/> Integrating IK |

Where did you hear about the DreamCatching Conference?

- School Board
- Advertisement
- Internet Search
- Email
- Personal Contact
- Other. Please specify.

The registration fee is 425\$ (CDN) per participant. This fee covers one pre-conference workshop (optional), all conference events, materials, snacks and lunches.

Workshop fees can be made payable by cheque or PO.

Please make cheques payable to Mount Pleasant Educational Services Inc.

*Mail completed registrations to
Mount Pleasant Educational Services Inc., PO Box 1959, Kahnawà:ke, QC, J0L 1B0
or fax to (514) 469-0763.*

Refund policy: Refunds, less a \$50 (CDN) administration fee, will be issued for cancellations received in writing up to March 31, 2007. Registration fees are non-refundable after March 31, 2007.