



National Alliance for Public Charter Schools presents
17th Annual National Charter Schools Conference
"A Chance for Every Child"
 June 11-14, 2017 • Washington, DC • Walter E. Washington Convention Center

Name: _____
 School/Organization: _____
 Address: _____
 City: _____ State: _____ ZIP: _____
 Phone: _____ Fax: _____
 E-mail: _____

For Group Registrations, 4-80 people from the same organization:

Group Contact Name: _____
 Group Contact Organization: _____
 Group Contact Email: _____ Phone: _____

JOB TITLE:

- | | | |
|--|---|--|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Facilities Manager | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Alumni/Student | <input type="checkbox"/> Funder/ Foundation Staff | <input type="checkbox"/> School Leader (Principal, Dean, Director) |
| <input type="checkbox"/> Authorizer | <input type="checkbox"/> IT/Technology | <input type="checkbox"/> Special Education |
| <input type="checkbox"/> Board Member | <input type="checkbox"/> Lawyer | <input type="checkbox"/> State Association Staff |
| <input type="checkbox"/> Business Community | <input type="checkbox"/> Legislator/Staff | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> CFO/Business Manager | <input type="checkbox"/> Media | <input type="checkbox"/> Vice Principal/Academic Director |
| <input type="checkbox"/> Curriculum Specialist | <input type="checkbox"/> Parent | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> EMO/CMO Staff | <input type="checkbox"/> Policy Advocate | |

PLEASE SELECT THE CATEGORY THAT BEST DESCRIBES YOU (or your organization, in case of a group):

- | | | |
|-------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> School | <input type="checkbox"/> CSO | <input type="checkbox"/> Non-profit |
| <input type="checkbox"/> Government | <input type="checkbox"/> Business | <input type="checkbox"/> Charter School Student/Alumni |

PLEASE SELECT THE CONFERENCE STRAND WITH WHICH YOU MOST IDENTIFY:

- | | | |
|-------------------------------------|--------------------------------------|---------------------------------|
| <input type="checkbox"/> Operations | <input type="checkbox"/> Instruction | <input type="checkbox"/> Policy |
| <input type="checkbox"/> Leadership | <input type="checkbox"/> Governance | |

HOW MANY TIMES HAVE YOU ATTENDED THE CONFERENCE?

- | | |
|--|------------------------------------|
| <input type="checkbox"/> This is my first year | <input type="checkbox"/> 5-7 years |
| <input type="checkbox"/> 2-4 years | <input type="checkbox"/> 8+ years |

HOW DID YOU HEAR ABOUT THE CONFERENCE?

- | | | |
|--|---|--|
| <input type="checkbox"/> Postcard | <input type="checkbox"/> Word of mouth | <input type="checkbox"/> Social media (facebook, twitter, etc.) |
| <input type="checkbox"/> State Association Email | <input type="checkbox"/> Google/other search engine | <input type="checkbox"/> Email from session presenter |
| <input type="checkbox"/> Listserv | <input type="checkbox"/> Online advertisement | <input type="checkbox"/> Information mailed to your school/workplace |
| <input type="checkbox"/> Link from another site | <input type="checkbox"/> Blog Post | <input type="checkbox"/> Other: _____ |

GENDER

- | | | |
|-------------------------------|---------------------------------|---|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Prefer not to answer |
|-------------------------------|---------------------------------|---|

AGE

- | | | |
|--------------------------------|--------------------------------|---|
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 46-55 | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> 25-35 | <input type="checkbox"/> 56-66 | |
| <input type="checkbox"/> 36-45 | <input type="checkbox"/> 66+ | |

I HAVE A DIETARY RESTRICTION (check all that apply)

- | | | |
|-------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Vegetarian | <input type="checkbox"/> Gluten Free | <input type="checkbox"/> Other: _____
(Please specify) |
|-------------------------------------|--------------------------------------|---|

ETHNICITY

- Caucasian Asian Other: _____
 Hispanic Pacific Islander Prefer not to answer
 Black American Indian

ADA NEEDS

- Please contact me regarding my Americans with Disabilities Act needs.

REGISTRATION INFORMATION

Mailing List

A limited number of our sponsors will send out one email OR one hard copy mailing prior to the conference as well as one email OR hard copy mailing after the conference. These organizations are vital to the support of the conference and they are the critical element that allow us to keep our registration costs down. However, if you wish to opt out of receiving this information, please check the box below.

- I wish to receive information from conference sponsors and exhibitors.
 I wish to opt out of receiving information from conference sponsors and exhibitors.

Attendee Roster

- Yes No

By selecting Yes you are agreeing to appear in the printed roster that is provided to our attendees, speakers and exhibitors at the conference, which includes your name, company name (if applicable) and country of residence, it will not display your email address or any other contact information.

REGISTRATION OPTIONS—Please circle the most appropriate price.

Please choose the most appropriate price	Super Early Through Dec. 19	Early through Feb. 27	Advance through Apr. 24	Regular through Jun. 7	Late/ Onsite After Jun. 7
Individual	\$475	\$525	\$620	\$750	\$788
Groups of 4 -19 people (price is per person) Please fill out one registration form per group member OR if you are registering a group and the basic contact information of each group member is the same, please fill out one form and provide individual attendee names/emails on a separate sheet. A unique e-mail address is required for each registrant. Multiple uses of an e-mail address will not be accepted.	\$400	\$475	\$575	\$675	\$709
Groups 20+ For groups of 20 or more attendees registering from the same organization.	\$365	\$410	\$520	\$610	\$641
Groups 80+ For groups of 80 or more attendees registering from the same organization.	\$330	\$370	\$470	\$470	\$494
Teacher Discount	\$375	\$400	\$475	\$575	\$604
Full-time School of Education Students	\$350	\$425	\$440	\$525	\$552
Charter School Student or Alumni	\$150	\$200	\$250	\$250	\$263
One Day Pass	\$325	\$375	\$425	\$475	\$499

Guest Registration
 You may register one guest per registration (\$225 charge). This includes admission to all general sessions, the exhibit hall on June 12 & June 13, the June 11 Welcome Reception and lunch on June 12 & June 13. Admission to breakout sessions is not included with a guest registration.
 Please indicate the first name and last name of your guest.
 First Name: _____ Last Name: _____

Continuing Education Units • Awarded by the NAPCS
 YES, I want to register for participation in the CEU program. The fee for obtaining the certificate is \$45.
 Please check your email as registration information will be sent to you via email.

REGISTRATION FEES: \$ _____

PAYMENT OPTIONS

TOTAL REGISTRATION FEES:
\$ _____

CREDIT CARD: Registrations with credit card payment accepted only online (do not complete this form).
Mastercard, Visa, AMEX accepted

CHECK NUMBER: _____

Make checks payable to: National Alliance for Public Charter Schools
Mail check to: 2017 National Charter Schools Conference
1277 University of Oregon
Eugene, OR 97403-1277

PURCHASE ORDER:

PO Number: _____
Organization: _____
Contact Name: _____
Address: _____
City: _____ State: _____ ZIP: _____

SEND YOUR REGISTRATION BY FAX OR MAIL . . .

Fax: 541.346.3545
Mail: 2017 National Charter Schools Conference
1277 University of Oregon
Eugene, OR 97403-1277

QUESTIONS?

Call 541.346.3537 or 800.280.6218
E-mail: natlcharterconf@ce.uoregon.edu

CANCELLATION & REFUND POLICY

Conference cancellations must be requested in writing and will be subject to the following fees:

- Before December 31, 2016 20% cancellation fee.
- January 1, 2017–March 31, 2017. 50% cancellation fee.
- April 1, 2017–June 1, 2017 80% cancellation fee.
- No refunds will be given after June 1, 2017.

Email requests to natlcharterconf@ce.uoregon.edu or fax to 541-346-3545