

Conference Registration

Please print clearly!

... Or Register Online!

<https://apps.dese.mo.gov/interpreterregistration/default>

Name: _____
(Last) (First)

Phone: _____ Email: _____
(Must provide email address for confirmation of registration)

Mailing Address: _____

___ Sign me up for the MCDHH Listserv!

Conference Registration Prices *Select One*

Early Bird

- ___ Early Bird 2-Day \$135
CDI \$110
(Friday & Saturday Sessions,
Saturday Luncheon)
- ___ Early Bird Saturday Only \$115
CDI \$90
(Saturday Sessions only,
Saturday Luncheon)

This rate is given to anyone who submits
their registration **postmarked by**
August 25, 2017

Regular

- ___ Regular 2-Day \$160
CDI \$135
(Friday & Saturday Sessions,
Saturday Luncheon)
- ___ Regular Saturday Only \$140
CDI \$115
(Saturday Sessions only,
Saturday Luncheon)

This rate is given to anyone who submits
their registration **postmarked between**
August 26 and September 8, 2017

On-Site

- On-Site 2-Day \$175
CDI \$150
(Friday & Saturday Sessions, no meals)
- Regular Saturday Only \$140
CDI \$115
(Saturday Sessions only)

On-site registration does NOT include
Saturday Luncheon. Availability of
special tickets on-site is not guaranteed.
The on-site rate is required for all on-site
registration.

*Registrations postmarked after September 8 will be returned to sender. To register
after September 8, you must do so at the door using the on-site rate. No refunds will
be given after September 8.*

**CHECK IS THE ONLY ACCEPTED
FORM OF PAYMENT ON-SITE
ABSOLUTELY NO CASH**

Pre-Order for Extra Tickets

Saturday Breakfast: ___ x \$20 each
Saturday Luncheon: ___ x \$22 each

Special Dietary Needs

___ Diabetic ___ Vegetarian ___ Other: _____

We will make every effort to accommodate your needs.

Special Accommodations

Special accommodations requests must be made by September 8, 2017. Contact MCDHH to discuss your needs.

Demographic Information	___ Under 25	___ Teacher	___ MICS Novice	___ RID Certified
	___ 25-44	___ Parent	___ MICS Apprentice	___ NAD Certified
	___ Male	___ Administrator	___ MICS Basic	___ BEI Certified
	___ Female	___ Interpreter	___ MICS Advanced	___ CDI/DI
	___ Over 65	___ Student	___ MICS Master	___ Other Certification

Payment

Make cashier's checks or money order payable to: MCDHH/BCI Fund
Mail this form and payment to MCDHH
3216 Emerald Lane, Suite B, Jefferson City, MO 65109

FOR OFFICE USE ONLY

DATE RECEIVED | RECEIVED BY | AMT PAID | CHECK/PO NUMBER | MEALS | EMAIL SENT/INITIALS