

Wisconsin Association for Bilingual Education  
**31 years of WIABE** Registration Form  
**Two Day Conference: April 30 & May 1, 2010**

**PRE-registration Fees: (Postmarked / Faxed on or before February 5, 2010)**

<b>\$150.00</b>	<b>This includes registration materials, bag, Friday Teacher of the Year, Opening Ceremonies &amp; Reception. Saturday workshop sessions, keynote speaker, breakfast, lunch &amp; banquet event, membership to WIABE for one year, exhibitors and WIABE Anniversary Shirt Please specify Adult Size:          ___S ___M ___L ___XL ___XXL ___XXXL</b>
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**LATE Registration Fees:**  
 (Postmarked / Faxed after February 5, 2010)

<b>\$175.00</b>	<b>This includes late registration materials, bag, Friday Teacher of the Year, Opening Ceremonies &amp; Reception. Saturday workshop sessions, keynote speaker, breakfast, lunch &amp; banquet event, membership to WIABE for one year, and exhibitors</b>
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**ON SITE Registration Fees**

<b>\$200.00</b>	<b>This includes on site registration materials, Friday Teacher of the Year, Opening Ceremonies &amp; Reception, Saturday workshop sessions, keynote speaker, meals and banquet event, membership to WIABE for one year, and exhibitors.</b>
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*Please write the amount in the boxes below and total amount that you are sending.*

<b>PRE-registration fee \$150.00</b> (If sent or faxed on or before <b>Friday, February 5, 2010</b> )	\$
<b>LATE registration fee \$175.00</b> (If sent or faxed <b>AFTER Friday, February 5, 2010</b> )	\$
<b>ON SITE Registration fee \$200.00</b>	\$
<b>Total amount enclosed</b>	\$

**\*Please select one for Lunch and one for Dinner**

(Breakfast same selection for everyone)      \_\_\_ Breakfast

**Lunch:**                      \_\_\_ Grilled Chicken Salad                      \_\_\_ Prime Rib Sandwich

**Dinner:**                      \_\_\_ Herb Roasted Chicken                      \_\_\_ Braised Beef Tips                      \_\_\_ Veggie

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Please complete the following form in order to update our records and receive emails from **WIABE**

\_\_\_\_\_  
(Last name, first name – Please print)

\_\_\_\_\_  
Home address

\_\_\_\_\_  
City, State and Zip code

H (    )

W (    )

\_\_\_\_\_  
Home phone number and work phone number (include area code)

\_\_\_\_\_  
e-mail

\_\_\_\_\_  
School or organization

\_\_\_\_ Educator

\_\_\_\_ Parent Coordinator

\_\_\_\_ Parent

\_\_\_\_ Administrator

\_\_\_\_ Other \_\_\_\_\_

**Method of Payment**

Make checks payable to **WIABE**

School Check # \_\_\_\_\_

Personal Check# \_\_\_\_\_

Purchase Order # \_\_\_\_\_

Other Source \_\_\_\_\_

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**WIABE use only**    Date Received \_\_\_\_\_

PO/ Check Number \_\_\_\_\_  
(init. \_\_\_\_\_)

**Please submit this form with your registration form to:**

**Cyndy Mendoza- Corresponding Secretary**

**WIABE**

**PO Box 340192**

**Milwaukee, WI. 53234-0192**

**Tel # (414) 875-6410**

**Fax # (414) 875-6415**

**Email [mendoza@milwaukee.k12.wi.us](mailto:mendoza@milwaukee.k12.wi.us)**

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**For Additional Guest Meals Only**

<p>Please fill this area if you are bringing a guest to the breakfast, lunch or evening banquet. A check for the amount must be submitted with the registration form. Waiting till the conference does not guarantee your guest a meal</p>	<p><b>Banquet @ \$35.00 X</b> _____ = _____</p> <p><b>Breakfast @\$15.00 X</b> _____ = _____</p> <p><b>Lunch @ \$20.00 X</b> _____ = _____</p> <p style="text-align: center;"><b>Adults Only No children at the Banquet</b></p>
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Guest Name \_\_\_\_\_

**Choices**

(Breakfast same selection for everyone) \_\_\_\_\_ Breakfast

**Lunch:** \_\_\_\_\_ Grilled Chicken Salad \_\_\_\_\_ Prime Rib Sandwich

**Dinner:** \_\_\_\_\_ Herb Roasted Chicken \_\_\_\_\_ Braised Beef Tips \_\_\_\_\_ Veggie

Guest Name \_\_\_\_\_

**Choices**

(Breakfast same selection for everyone) \_\_\_\_\_ Breakfast

**Lunch:** \_\_\_\_\_ Grilled Chicken Salad \_\_\_\_\_ Prime Rib Sandwich

**Dinner:** \_\_\_\_\_ Herb Roasted Chicken \_\_\_\_\_ Braised Beef Tips \_\_\_\_\_ Veggie