

# GROUP REGISTRATION FORM (Five or more attendees)

NCTM 2022 Regional Conference Indianapolis • March 16-18, 2022

## 1 Coordinator's Information \* Required Information

First Name\* \_\_\_\_\_  
 Last Name\* \_\_\_\_\_  
 Institution\* \_\_\_\_\_  
 Address\* \_\_\_\_\_  
 City\* \_\_\_\_\_  
 State/Province\* \_\_\_\_\_  
 ZIP/PC\* \_\_\_\_\_ Country\* \_\_\_\_\_  
 Email\* \_\_\_\_\_  
 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 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. Please note, each attendee will be required to sign a waiver prior to your receiving event badge and materials.

### Questions?

**Online:** [www.nctm.org/indy2022](http://www.nctm.org/indy2022)  
**Mail:** B7H FY[ ]cbU 7cbZfybW FY[ ]gfuHcb  
 D'C" 6cl ; ( ( &+ + 8U UgZHL + ) & , !( &+ +  
**Phone:** (800) 561-6691 (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:** B7H FY[ ]cbUg4 g'ck WfY'Vta

## 2 Attendee Information (for 5 or more attendees; add sheets as needed)

**Group Registration:** Rates are per registrant, for registering groups of 5 or more. One year of Essential membership included.

**Group (5 or more):** ' ' ' ' YUM VmJanuary '19 UbX ' ' ) - YUM UZYF January 19

| Mbr # | Name  | JF:   | Job Function**<br>& Grade Level*** | FY[ ]gfuHcb<br>by January 19 | FY[ ]gfuHcb<br>by March 11 | DYI7cbZfybW<br>K cf_g'cd<br>\$145 | TOTAL    |
|-------|-------|-------|------------------------------------|------------------------------|----------------------------|-----------------------------------|----------|
| _____ | _____ | _____ | _____                              | <input type="checkbox"/>     | <input type="checkbox"/>   | <input type="checkbox"/>          | \$ _____ |
| _____ | _____ | _____ | _____                              | <input type="checkbox"/>     | <input type="checkbox"/>   | <input type="checkbox"/>          | \$ _____ |
| _____ | _____ | _____ | _____                              | <input type="checkbox"/>     | <input type="checkbox"/>   | <input type="checkbox"/>          | \$ _____ |
| _____ | _____ | _____ | _____                              | <input type="checkbox"/>     | <input type="checkbox"/>   | <input type="checkbox"/>          | \$ _____ |
| _____ | _____ | _____ | _____                              | <input type="checkbox"/>     | <input type="checkbox"/>   | <input type="checkbox"/>          | \$ _____ |

\*\*Job Functions: Experienced Teacher, Early Career Teacher, Administrator, Coach/Coordinator, Math Specialist, University/College Professor, Student/Preservice, Consultant, Retired  
 \*\*\*Grade Levels: PK-2, 3-5, 6-8, 9-12, Higher Ed

## 3 Total Payment

Total Payment in U.S. dollars \$ \_\_\_\_\_

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 emailed registration, or mail/fax a copy with your registration form.

**Cancellation requests** must be received in writing on or before February 14, 2022. NCTM will issue a full refund minus a \$50 cancellation fee for members, nonmembers, each person affiliated with a group and a \$25 fee for emeritus members. Workshops and membership dues are non-refundable. Substitutions will be accepted via email or letter prior to February 14. Refer to [nctm.org/indy2022](http://nctm.org/indy2022) for the full cancellation policy.

**Attendees with a disability**, as defined by ADA, should send requests by email to [conferencedept@nctm.org](mailto:conferencedept@nctm.org). To ensure your request is fulfilled, please send the request before February 14, 2022.

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 \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_