



Strategic Instruction Model Special/General Education Collaborative AND Cal-SIM Update Conference

Thursday Evening, Friday, Saturday, June 14-16, 2007

Holiday Inn Buena Park (by Knott's Berry Farm)

7000 Beach Boulevard, Buena Park, CA 9062

For Reservations: 714-690-4605 by May 24, 2007 for \$89 rate

Group: Cal-SIM

SPACE IS LIMITED, REGISTER TODAY!

Name: _____

School/District/Workplace _____

Mailing Address: _____ Fax: _____

City: _____ State/Province _____ Zip: _____

Is Your Mailing Address: Home Address or Work Address

FAX # _____ email: _____

Phone (home) _____ (work) _____

SIM Professional Developer (Inservice, Preservice or Apprentice PD): YES** NO

**Please do not use this form for registration for the CAL – SIM Update Conference

Conference Sessions:

_____ I will attend the Thursday evening <u>Reception</u> with Dr. Don Deshler.....	(No Cost)
_____ I will attend the <u>Administrator's Session</u> , Friday (One Day).....	\$35.00
_____ I will attend the <u>Administrator's Session</u> on Friday AND <u>Educator's Sessions</u> on Saturday, (2 Days).....	\$100.00
_____ I will attend the <u>Educators Sessions</u> , Friday AND Saturday, (2 Days).....	\$130.00
_____ I will attend <u>Educators Session</u> on Friday (One Day) or Saturday (One Day) (Please circle one).....	\$65.00
_____ I am a <u>CSUF INTERN or ON TRACK</u> student. I will attend Friday (One Day) or Saturday (One Day).....	(No Cost)
_____ I am a student. I will attend Friday (One Day) or Saturday (One Day).....	\$35.00*
_____ I am a student. I will attend Friday and Saturday (Two Days).....	\$70.00*
_____ Late Registrations, Postmarked after May 15, 2007.....	ADD \$25.00
Total Cost:	

Make check or P. O. payable in full to: [CSUF Auxiliary Services](#)

By May 15, 2007 send to: [Luz Zapata, EC-190, 800 N. State College Blvd., Fullerton, CA 92834-6868](#)

For Registration postmarked after May 15, 2007, add a \$25 late fee. If your institution is paying your bill and is not able to meet this deadline, please send us the completed Registration form by May 15th and indicate that payment will follow. A late fee will not be charged in this case. **Cancellation Fee of \$25 for cancellations after May 15, 2007. Refund Policy:** If you cannot attend this conference, you must notify KU-CRL by May 15, 2007 to receive a full refund of your registration fee. Partial refunds may be made if your cancellation is received between May 16 and June 1. We will be unable to issue any refunds after June 1, 2007

Amount Enclosed: Registration \$ _____ + (\$25 Late Fee) = **TOTAL ENCLOSED (U.S)** \$ _____

QUESTIONS:

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