



National Alliance for Public Charter Schools presents  
**10th Annual National Charter Schools Conference**  
 June 28–July 1, 2010 • Chicago, IL  
 McCormick Place–Lakeside Convention Center

Name: \_\_\_\_\_

School/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**JOB TITLE:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Administration            | <input type="checkbox"/> Facilities Manager                              | <input type="checkbox"/> State Association Staff |
| <input type="checkbox"/> Authorizer                | <input type="checkbox"/> Funder/Foundation Staff                         | <input type="checkbox"/> Student/Alumni          |
| <input type="checkbox"/> Board Member              | <input type="checkbox"/> Media   | <input type="checkbox"/> Teacher                 |
| <input type="checkbox"/> Business/Community Leader | <input type="checkbox"/> Parent  | <input type="checkbox"/> Vendor (non-exhibitor)  |
| <input type="checkbox"/> CFO and Business Manager  | <input type="checkbox"/> Policy Maker - Political Advocate (national)    |  |
| <input type="checkbox"/> Curriculum Specialist     | <input type="checkbox"/> Policy Maker - Political Advocate (state-local) |  |
| <input type="checkbox"/> Developer                 | <input type="checkbox"/> Political Advocate                              |  |
| <input type="checkbox"/> EMO/CMO                   | <input type="checkbox"/> School Leader                                   |  |
| <input type="checkbox"/> Other: _____              |  |  |

**IF YOU ARE A TEACHER . . .**

**Please select Grade Level (check all that apply):**

- |  |  |                                      |
|--|--|--------------------------------------|
| <input type="checkbox"/> Elementary School | <input type="checkbox"/> Middle School | <input type="checkbox"/> High School |
|--|--|--------------------------------------|

**Please select Subject (check all that apply):**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Reading        | <input type="checkbox"/> Math                   | <input type="checkbox"/> Science           |
| <input type="checkbox"/> Social Studies | <input type="checkbox"/> Visual/Performing Arts | <input type="checkbox"/> Special Education |
| <input type="checkbox"/> Best Practices | <input type="checkbox"/> Other: _____           |  |

**HOW LONG HAS YOUR SCHOOL BEEN IN OPERATION?**

- |   |                                    |                                       |
|---|------------------------------------|---------------------------------------|
| <input type="checkbox"/> 1-3 years          | <input type="checkbox"/> 3-5 years | <input type="checkbox"/> Over 5 years |
| <input type="checkbox"/> Has not opened yet | Estimated Opening Date: _____      |                                       |

**IS THIS YOUR FIRST NATIONAL CHARTER SCHOOLS CONFERENCE?**

- |                              |                             |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

**HOW DID YOU HEAR ABOUT THE CONFERENCE?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Postcard/Mailing        | <input type="checkbox"/> Fax                 | <input type="checkbox"/> National Charter Schools Listserv |
| <input type="checkbox"/> State Association Email | <input type="checkbox"/> Previously Attended | <input type="checkbox"/> Colleague/Friend                  |
| <input type="checkbox"/> Conference Web Site     | <input type="checkbox"/> Other: _____        |  |

**MAILING LIST**

A limited number of our sponsors and exhibitors 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.

**ADA NEEDS**

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

**Innovative Practices**

Please tell us up to 3 innovative practices that your school is doing e.g. curriculum, school operations, fundraising, parental involvement

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**REGISTRATION OPTIONS**—Please circle the most appropriate price.

**NOTE: Registration fees include:**

- June 28 Welcome Reception
- June 29, 30 and July 1 Breakfast
- June 29 and 30 Lunch
- June 29 Happy Hour Reception

**Member of an NCSC Affiliate?**

List affiliate name: \_\_\_\_\_

Please choose the most appropriate price	Early Early Bird Through November 25	Early Bird November 26 through Jan 31	Advance February 1 through May 31	Late After June 1 through June 17
<b>Individual</b>	\$425	\$475	\$575	\$725
<b>Groups of 4 or More (price is per person)*</b> Please fill out one registration form pr 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	\$325	\$400	\$500	\$650
<b>Teachers Discount</b>	\$300	\$350	\$450	\$550
<b>Full-Time School of Education Students</b>	\$300	\$350	\$415	\$500
<b>Charter School Alumni</b>	\$125	\$175	\$175	\$175
<b>One Day Pass</b>	\$325	\$375	\$425	\$475

**\* Affiliate Group Rates**

If you have a group of 20 or more attendees who will be registering from the same organization, you may request an Affiliate Group Rate Code to receive 10% discount off whatever the current group rate at the time of registration. Please email: [natlcharterconf@continue.uoregon.edu](mailto:natlcharterconf@continue.uoregon.edu)

**Guest Registration**

One guest per registration (\$185 charge). Includes admission to all general sessions, exhibit hall on June 29 & June 30, June 28 opening reception and June 29 & 30 lunch. 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 Arizona State University**

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:**

\$ \_\_\_\_\_

**CHECK NUMBER:** \_\_\_\_\_

Make checks payable to: **National Alliance for Public Charter Schools**

Mail check to: 2010 National Charter Schools Conference  
1277 University of Oregon  
Eugene, OR 97403-1277

**CREDIT CARD:**  American Express  Mastercard  Visa

Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ CVV2# \_\_\_\_\_

Card Number: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address (if different from registration address)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## PURCHASE ORDER:

PO Number: \_\_\_\_\_

Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

### SEND YOUR REGISTRATION BY FAX OR MAIL . . .

**Fax:** 541.346.3545

**Mail:** 2010 National Charter Schools Conference  
1277 University of Oregon  
Eugene, OR 97403-1277

### QUESTIONS?

Call 541.346.3537 or 800.280.6218

E-mail: [natlcharterconf@continue.uoregon.edu](mailto:natlcharterconf@continue.uoregon.edu)

### CANCELLATION & REFUND POLICY

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

- **Before December 31, 2009 . . . . . 20% cancellation fee.**
- **January 1, 2010–March 31, 2010 . . . . . 50% cancellation fee.**
- **April 1, 2010–June 1, 2010 . . . . . 80% cancellation fee.**
- **No refunds will be given after June 1, 2010.**

Email requests to [natlcharterconf@continue.uoregon.edu](mailto:natlcharterconf@continue.uoregon.edu) or fax to 541 -346-3545