2nd Annual Equity in Education Conference Registration Form

Center for the Education and Equity of African American Students (CEEAAS)

"Keeping the Dream: Culturally Sustaining Teaching and Learning"

Tuesday, January 15, 2019
Columbia Metropolitan Convention Center
Columbia, South Carolina, USA

Personal Information			
Please type your information as you would like it to appear o	n conference materials	s.	
First Name*	Last Name*		
First Name for Name Badge*	Title/Position		
Primary Phone*	Email*		
Secondary Phone			
Home Address*			
City*	State*	Postal Code*	
School District/Organization*			
*Required information			
Registration Fees			
Conference registration fee of \$95/\$115 includes all CEEAAS orders, or purchase orders PAYABLE TO USC. A confirmation			
Registration will be on a first-come basis. Inquiries regarding confs@mailbox.sc.edu. Payment must be attached to a comphe purchase order and must list all participant(s) on the Purchase orders will be billed for all persons registered regard	leted registration form purchase order. Each	 Participants' registration h registrant must have an ind 	forms must accompany lividual form completed.
Early Bird Registration (On or before November 2, 2018):	. •	Early (\$95)	
Registration (After November 2, 2018):		Regular (\$115)	
Payment Method Check Purchase Order (PO me	ust be attached and s	show participant's name(s)	Credit Card
		TOTAL DUE	
Special Assistance Reques	sts		
Please indicate if you need any form of assistance or accomm specific as possible.	nodations either with th	he hotel or conference facilitie	es. Please be as

Please indicate if you have any dietary restrictions or special requests.

Questions

If you are experiencing difficulties with the registration process, please contact Conference & Event Services at +1-803-777-9444 or confs@mailbox.sc.edu.

Conference questions can be directed to Dr. Jennifer Clyburn Reed at REEDJC@mailbox.sc.edu.

Method of Payment (Mail or Fax)

Cancellation Policy

Registration fees are non-refundable.

Card Number: _____

method of rayment (man of rax)									
CEC Office Use Or	nly:								
DATE:	MTH	_\$	APPVL	A	CC 4	Ехр			
Please complete the payment information and mail this registration form with your payment to: 2nd Annual Equity in Education Conference Registration Form									
University 1705 Colle	Education and Confere of South Carolina ege Street, Suite 591 SC 29208, USA	nces							
You may FAX your registration to +1-803-777-2663. Make all methods of payment payable to the University of South Carolina.									
If you wish to charge your fees, enter your account number and sign below									
☐ Check	☐ IIT (USC De	☐ IIT (USC Departments Only) Account			Fund				
☐ Mastercard	☐ American Exp	oress	☐ VISA	☐ Discover					
PLEASE PRINT The charge on your credit card statement will appear from the University of South Carolina									
Name on Card:									
Cardholder Signatu	re·			Date [.]					

Please do not scan and email this form with credit card information.

It is not secure and will not be accepted.

Exp. Date: _____ CVV: ____