REGISTRATION FORM

NOTE: Registration will be accepted ONLY if this form is filled out completely and is accompanied by a check, credit card information or a purchase order. For Wire Transfers, please fax completed registration form and provide Wire Transfer information requested at bottom of page.

PLEASE PRINT

REGISTRANT INFORMATION

Registrant's Name or (TBA) _____ Gender M / F

Home Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ Home Phone _____

Home/your summer Email Address _____

Registrant's Email Address at School _____

Please Enroll Me in the Following Workshop _____

Workshop Date _____ Workshop Level: L1 / L2 / L3 yrs. Of IB Experience_____

SCHOOL INFORMATION

School Name _____ IB School Code _____

School Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ School Phone _____ Fax _____

IB Coordinator _____ Phone _____

IB Coordinator's Email Address _____

PAYMENT INFORMATION

☐ Workshop registration	$ 1099
☐ Guest shares room with registrant	$ 350
☐ Guest under age 10 shares 2 or 3 person room with registrant	$ 200
☐ Single Room (depends on availability)	$ 200
☐ Late fee (after May 1)	$ 50
☐ Late fee (after May 15)	$ 100

Enter Total Fee

Charge to ☐ Visa or ☐ MasterCard or ☐ AmEx or ☐ Discover

Card number (required) _____ expiration date (required) _____

Name and Address of Cardholder (if different from registrant) _____

Signature of cardholder (required) _____

Wire Transfer Federal Reference # _____ Date Sent _____