

# NJTESOL/NJBE

NJ Teachers of English to Speakers of Other Languages / NJ Bilingual Educators

## 2012 SPRING CONFERENCE

May 30 & 31, 2012

**Hyatt Regency, New Brunswick, NJ**

Check-in held from 7:30 a.m. to 9:30 a.m.

### Conference Registration Form

Send one completed form for each person.

Name (First) \_\_\_\_\_ (Last) \_\_\_\_\_ Phone (H) \_\_\_\_\_

Home Address \_\_\_\_\_ Phone (W) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County of Residence \_\_\_\_\_

Personal E-Mail (please print clearly) \_\_\_\_\_ School District/Affiliation \_\_\_\_\_

Email confirmations will be sent out to all registrants who provide a personal email address.  
If you would like a receipt, please send a self-addressed, stamped envelope along with your registration.

### Registration Process:

- **Mark dates of attendance** (Wednesday, May 30 and/or Thursday, 31) and fee to be paid  
\$30 Processing fee for cancellations – No refunds after May 8, 2012  
\$10 Fee for changes in payment processing

**\*THERE WILL BE NO ON-SITE REGISTRATION\* \*No Fax or Email Registrations Accepted\***

***\*Lunch is a gift of the organization and not included in the registration cost\****

### Registration: Must be postmarked by May 11, 2012

NJTESOL/NJBE Member <i>(Membership must be valid thru May 2012 or you are joining or renewing at this time)†</i>	Non-Member <i>(Not a current NJTESOL/NJBE member or not joining at the time of registration)</i>
<input type="checkbox"/> Wednesday - \$159	<input type="checkbox"/> Wednesday - \$194
<input type="checkbox"/> Thursday - \$159	<input type="checkbox"/> Thursday - \$194
<input type="checkbox"/> Both Days - \$239	<input type="checkbox"/> Both Days - \$274

Teachers' Aides/Parents of Children in ESL/Bilingual (must be sponsored by school district),  
Retirees, Full-Time Students\* (\*Must send full-time student status documentation from college w/ registration)

Wednesday - \$75       Thursday - \$75       Both Days - \$109

**Awards Reception** May 30 - Wednesday Night 5:00 – 6:30 p.m.

***Join your colleagues and NJTESOL/NJBE friends  
in a casual get-together after the conference!***

***Light refreshments will be available.***

- I plan on attending reception  
 I do not plan on attending reception

Office Use Only:

Date Rec'd: \_\_\_\_\_ Date Processed: \_\_\_\_\_ Member: Y/N Exp. Date: \_\_\_\_\_ Conf e/m sent: \_\_\_\_\_

A D: Y/N \_\_\_\_\_ Donation: \_\_\_\_\_ Inv #: \_\_\_\_\_ PO#: \_\_\_\_\_ Chk. #: \_\_\_\_\_ Amt. Rec'd: \_\_\_\_\_

**Scholarship Fund Donation:** \$5 \$10 \$25 \$50 \$100  Other \_\_\_\_\_

• **Check Method of Payment:** (check or purchase order)

\_\_\_\_\_ **Check** (enclosed and made payable to NJTESOL/NJBE, Inc.)

\_\_\_\_\_ Conference Fees \_\_\_\_\_ Membership Fees (if applicable) † \_\_\_\_\_ Donation

\_\_\_\_\_ **Purchase Order** (Payable to NJTESOL/NJBE, Inc.)

\_\_\_\_\_ Conference Fees \_\_\_\_\_ Membership Fees (if applicable) † \_\_\_\_\_ Donation

**Registrations forms MUST BE SENT WITH the approved/signed Purchase Order in order to be processed. Registration forms sent without a PO will not be processed.**

One PO per district is preferred. Please send a list of registrants with the completed forms.

• **Mail to:**

NJTESOL/NJBE Spring Conference 2012

230 Ashland Ave.

Cherry Hill, NJ 08003

• **Follow Up:**

Email confirmations will be sent out to all registrants who provide a personal email address. If your registration is being sent by your school, please check to assure that the registration form and purchase order has been sent.

† **ONLY** for those who wish to join or need to update NJTESOL/NJBE membership and are enclosing membership fees:

New Membership  \$35 One Year  
 Renewal  \$59 Two Years

Would you like your e-mail address added to the listserv? You will receive e-mail about employment opportunities, workshop and conference announcements, questions about state laws and standards, and more.

Yes  No

We sometimes give out member addresses (not e-mail) to our affiliates and other entities for the purpose of informing you of upcoming conferences and workshops of interest. Would you like to have your address provided to others for this purpose?

Yes  No

Please circle **ONE** or **TWO** numbers for the Special Interest Group or Groups (SIG) you wish to belong to:

1. Early Childhood (Pre-K – K)
2. Bilingual Elementary Education
3. ESL Elementary Education Grades 1-5
4. ESL Grades 6-8
5. Bilingual Secondary Education
6. ESL Secondary Education
7. Higher Education
8. Teacher Education
9. Special Education
10. Adult Education
11. Parent/Community Action
12. Supervisors

First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_