

REGISTRATION FORM

Speech and Debate as Civic Education Conference March 5–7, 2015

This form may be duplicated for additional registrations. Please print in ink or type. Return to Penn State by **February 27, 2015**.

Last nameFirst nameMiddle initial

Date of birth (month/day/year)

[] Male [] Female

Email address

Penn State will use this email address to communicate with me about all programs for which I register. This email address will also be used to communicate logistical information regarding the program.

Company or organizationOccupational title

Mailing address (no. and street, or box no.) Please check one: [] Home address [] Work address

CityStateZIP codeCountry

Phone no. Fax no.

Special dietary needs/accommodations (if none, leave blank): _____

Applicant’s Social Security no.* or Penn State ID no.*

*The Social Security number (SSN) you provide for enrollment purposes, or when requesting specific services, will be used by the University to verify your identity for official record keeping and reporting. If you choose not to supply your SSN, certain services — such as transcripts, enrollment verification, tax reporting, and financial aid — may not be available to you, and Penn State cannot guarantee a complete academic record for you. Your SSN will be stored in a central system and used only as a primary source to identify you within the Penn State system; the Penn State ID will be used as the primary identifier.

Regular Registration Fee: \$125

Student Registration Fee: \$75

Any registration received after **February 27, 2015**, will be considered a walk-in and will be assessed a \$30 fee.

Payment

Your payment, in full, must accompany your registration form. The Pennsylvania State University's federal ID number is 24-6000376.

Enclosed is a check or money order for the amount indicated, signed and payable to The Pennsylvania State University.

Enclosed is a purchase order (made payable to The Pennsylvania State University) or letter of authorization from my employer or sponsoring organization.

IDCC — Penn State employees only to &NCR. Document # _____
(A completed registration form is required to process your registration.)

Credit card: May be mailed or faxed.

American Express MasterCard Visa Discover

Cardholder's name (please print)

Cardholder's signature

Credit card no.

_____/_____
Exp date (mo/yr)

(Credit card charges cannot be processed without signature and expiration date.)

SEND TO:

Conferences and Institutes Registration
The Pennsylvania State University
Box 410
State College PA 16804-0410
Fax: 814-863-2765

