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2015 CSTEP Statewide Student Conference • The Sagamore on Lake George Bolton, New York• April 17, 2015 to April 19, 2015

Institution Information and Contact Person

| *Name: |  |  |  |  |
| :--- | :--- | :--- | :--- | :---: |
| Position: |  |  |  |  |
| Institution: |  |  |  |  |
| Address: | State: | Zip Code: |  |  |
| City: | Fax Number: | E-mail Address: |  |  |
| Telephone Number: |  |  |  |  |

* This person will be considered the PRIMARY CONTACT for information pertaining to the conference.


## Registration Fees per Institution

Please note: The Sagamore Reservation Form will be emailed to institutions AFTER REGISTRATION FEES have been paid to Syracuse University. Each institution is responsible for registering all institution participants directly with The Sagamore (see page 5). This fee does not cover hotel/lodging. The registration fee does not pay for students or staff hotel accommodations.

| Registration FEES AND DEADLINES | 2015 Conference Registration Fees <br> (per person |
| :--- | :---: |
| Early Registration Fee (Must be Received By January 23, 2015) | \$205.00/per person |
| Regular Registration Fee (Must be Received By February 6, 2015) | $\$ 230.00 /$ per person |
| Late Registration Fee (Must be Received By February 20, 2015) | $\$ 255.00 /$ per person |

- The registration rate will be determined by the above dates. Registration delivered to Syracuse University after February 20, 2015 will not be accepted.
- The LAST DAY to register for the 2015 CSTEP Statewide Student Conference is Friday, February 27, 2015!
- Registration fees will ONLY be accepted in the FORM OF Institutional Checks or Money Orders! Registration forms submitted without full payment will not be processed (purchased requisitions will be accepted).
${ }^{* * *}$ Personal checks, cash, credit cards, and electronic transfer of funds are not acceptable forms of payment. ***
- Checks or money orders should be made payable to: Syracuse University CSTEP Conference
- Payment should be mailed to: Dr. Leonese Nelson • Syracuse University • CSTEP Office

203 Bowne Hall • Syracuse, New York, 13244
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## Professional Staff/Guest ReGistration List

Please list all staff/guest who will be attending from your institution. Each institution is responsible for registering their staff with The Sagamore (see page 5). Please note the names in this section are only for conference registration purposes (i.e., nametags and meal counts). Please ensure that names are spelled correctly and are typed or legibly written.

|  | First Name | Last Name |  | T-Shirt <br> Sizes | Sunday Box Lunch | Special Dietary Needs |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
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| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |

[^0]*** Sunday Box Lunch Selections: $\{\mathbf{H}=\text { Ham, RB = Roast Beef, } \mathbf{T}=\text { Turkey, or } \mathbf{V}=\text { Vegetarian }\}^{* * *}$
***Please identify the following Dietary Needs next to Registrant Names. Dietary needs include: gluten free, peanut allergies, lactose intolerance, vegetarian, vegan, kosher diet, shellfish, etc.

## Institution Name

## Student Recistration list

Please list all students who will be attending from your institution. Each institution is responsible for registering their staff with The Sagamore (see page 5). Please note the names in this section are only for conference registration purposes (i.e., nametags and meal counts). Please ensure that names are spelled correctly and are typed or legibly written.

|  | First Name | Last Name | Classification <br> Freshmen, Sophomore, Junior, Senior, or Grad Student | Major | T-Shirt Sizes | Sunday Box Lunch | Special Dietary Needs |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 |  |  |  |  |  |  |  |
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| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |

*** T-shirt Sizes: $\{\mathbf{S}=\text { Small, } \mathbf{M}=\text { Medium, } \mathbf{L}=\text { Large, } \mathbf{X L}=\text { Extra Large, 2XL, and 3XL. }\}^{* * *}$
*** Sunday Box Lunch Selections: $\{\mathbf{H}=\text { Ham, } \mathbf{R B}=\text { Roast Beef, } \mathbf{T}=\text { Turkey, or } \mathbf{V}=\text { Vegetarian }\}^{* * *}$
***Please identify the following Dietary Needs next to Registrant Names. Dietary needs include: gluten free, peanut allergies, lactose intolerance, vegetarian, vegan, kosher diet, shellfish, etc.

## Student Registration list (CONtinued)

Please list all students who will be attending from your institution. Each institution is responsible for registering their staff with The Sagamore (see page 5). Please note the names in this section are only for conference registration purposes (i.e., nametags and meal counts). Please ensure that names are spelled correctly and are typed or legibly written.

|  | First Name | Last Name | Classification <br> Freshmen, Sophomore, Junior, Senior, or Grad Student | Major | T-Shirt Sizes | Sunday Box Lunch | Special Dietary Needs |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 |  |  |  |  |  |  |  |
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${ }^{* * *}$ Please identify the following Dietary Needs next to Registrant Names. Dietary needs include: gluten free, peanut allergies, lactose intolerance, vegetarian, vegan, kosher diet, shellfish, etc.
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Transportation Profile
Each institution must complete and submit a Transportation Profile. A completed registration packet includes this page!

1. Please indicate mode of transportation and the number of vehicles: (i.e. 2 buses, 1 van)

- Bus Number of Buses
- Van Number of Vans
$\qquad$
$\qquad$
- Car

Number of Cars
2. Are you carpooling with another institution?


If yes, which one(s) $\qquad$
3. Estimated time of arrival on Friday, April 17, 2015: $\qquad$
4. Estimated time of departure (if Iater than 11:00am on Sunday, April 19, 2015): $\qquad$

## Conference Registration Process

## STEP 1: Registration Fees

Please print and send this completed form with your registration fees (institutional check or money order) for participants directly to Syracuse University.
**Personal checks, cash, credit cards, and electronic transfer of funds are not acceptable forms of payment.**

## STEP 2: The Sagamore Reservation Form Submission

The Sagamore Reservation Form will be emailed to institutions AFTER REGISTRATION FEES have been paid to Syracuse University. Each institution is responsible for registering all institution participants directly with the Sagamore by using the Hotel Reservation Form.

[^1]
[^0]:    *** T-shirt Sizes: $\{\mathbf{S}=\text { Small, } \mathbf{M}=\text { Medium, } \mathbf{L}=\text { Large, } \mathbf{X L}=\text { Extra Large, 2XL, and } \mathbf{3 X L} .\}^{* * *}$

[^1]:    **Please retain a copy of this packet for your records!

