

Great Lakes Region Seminar 2012 - Fee Schedule and Registration Information	
Registration Fees	Registration Checklist
<u>Class Fees</u> 4-Day Student \$375 \$ Due Now \$200 \$ 2-Day Student \$255 \$ (Entire amount due now) <u>Registration for Mini-Class</u> \$30 \$ <u>Tuesday Night Out</u> <u>Lambeau Field tour with Dinner at Curly's Pub</u> Fee for Tour & Dinner \$50 \$ <u>Merchandise Night Tables</u> Full Table \$50 \$ If electricity is required \$15 \$ Half Table \$30 \$ Chapter Table \$25 \$ <u>Seminar Souvenir Pin</u> \$6 \$ Opening Banquet Guest Tickets \$40 \$ Closing Banquet Guest Tickets \$40 \$ <u>Late Registration Fee</u> \$40 \$ <u>Less</u> Early-Registration Fee Paid (\$50) \$ <u>Total Due (with this form):</u> \$	Have you enclosed..... _____ completed and signed Registration Form? _____ completed Fee Schedule w/check or money order (US funds)? _____ check payable to "GLR Seminar 2012"? (Any returned checks will incur a \$40 processing fee, and your registration will be delayed.) Are you..... _____ a first-time GLR seminar attendee? _____ willing to be a classroom angel? _____ willing to accept collect calls about your registration? _____ interested in participating in Teachers' Showcase? _____ willing to volunteer for other seminar activities (i.e., bookstore, boutique, meals, etc.)? _____ wish to exhibit at the Great Lakes Region Exhibit _____ an officer or hold a position in your chapter or on GLR Board? If so, what position(s)? _____ _____ Do you..... _____ need a Roommate List? _____ have special dietary needs? If so, describe below: _____ _____ _____ _____ (All listed dietary needs will be forwarded to the hotel's staff who will try their best to meet your needs.) <i>Please make a copy of this form for your records and send completed form with payment to the following address:</i> Karen Wojahn, Registrar 426 Woodfield Drive Green Bay, WI 54313-9563 Telephone: 920-662-0799 (before 8 pm CDT; NO collect calls) E-mail questions to GLR2012@new.rr.com Subject line must read as follows: GLR Seminar 2012
<p><u>You must sign and date this form below.</u></p>	

Reminder: You must be a registered guest at the Hotel Sierra, Green Bay, to participate in GLR Seminar 2012. Call the hotel directly to make your reservations. (See page 5 of the registration booklet.)

All listed dietary needs (above) will be forwarded to the hotel's staff who will try their best to meet your needs.

I agree to release The Embroiderers' Guild of America, Inc., the Great Lakes Region, and the Green Bay Area Chapter of The Embroiderers' Guild of America, Inc., from any liability for theft, property damage, or personal injury while participating in or attending any or all of the functions and meetings of the Great Lakes Region Seminar 2012.

I understand that cancellations must be made in writing, by Priority Mail with signature confirmation, to the Registrar by February 1, 2012. **NO REFUND REQUEST WILL BE CONSIDERED** after February 1, 2012.

Signature: _____ Date: _____

Great Lakes Region Seminar 2012 — April 22-26, 2012

Stitch Down in Titledown

This form must be postmarked on or before **November 15, 2011** to receive first-day consideration.

REGISTRATION FORM

(Please print or type)

Name _____
 Address _____
 City/ State/ Zip _____
 E-Mail _____
 Home# _____ Work# _____ Cell# _____
 Chapter _____ EGA# _____
 Name for Nametag _____

May we publish your e-mail address? Yes No

CLASS REGISTRATION (Three choices must be listed.)
(List four-day class selection in both Monday-Tuesday and Wednesday-Thursday sections.)

Four-Day or Two-Day Classes - April 23-24 (Monday-Tuesday)

Number	Class Title	Teacher
1st Choice: _____	_____	_____
2nd Choice: _____	_____	_____
3rd Choice: _____	_____	_____

Four-Day or Two-Day Classes - April 25-26 (Wednesday-Thursday)

Number	Class Title	Teacher
1st Choice: _____	_____	_____
2nd Choice: _____	_____	_____
3rd Choice: _____	_____	_____

Mini-Classes - April 22 (Sunday)

Number	Class Title	Teacher
1st Choice: _____	_____	_____
2nd Choice: _____	_____	_____
3rd Choice: _____	_____	_____

IN CASE OF AN EMERGENCY, PLEASE NOTIFY THE FOLLOWING PERSON:

Name: _____
 Relationship: _____ Phone(s): _____

These forms may be copied.

(Do not write in the spaces below. They are for Registrar's use only.)

Participant Name _____	Postmark Date _____
Confirmation mailed _____	
Amount Received _____	Total Balance Due _____
Kit Fees Due _____	Balance Received _____