



Great Lakes Region Seminar 2017 - May 6 - 10, 2017

This form must be **received** on or before October 15, 2016 to receive first-day consideration.

REGISTRATION FORM *(Please print or type)*

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Primary Phone # _____ Alternate Phone #: _____

Chapter: _____ EGA#: _____

Name for Nametag: _____
 (You will receive a nametag when you check-in)

A list of participants will be published in the Seminar Booklet. May we include your:

Address? Yes No Phone? Yes No Email? Yes No

CLASS REGISTRATION: (3 choices must be listed)

List four-day class selection in both Sunday/Monday and Tuesday/Wednesday sections.

Mini-Class (choose one) (Saturday Afternoon)

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

Four-Day or Two-Day Classes - May 7-8 (Sunday-Monday)

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

Four-Day or Two-Day Classes - May 9-10 (Tuesday-Wednesday)

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

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Name: _____

Relationship: _____ Phone(s): _____

These forms may be copied for distribution. Please make a copy of the complete form for your records.

Great Lakes Region Seminar 2017 — Fee Schedule and Registration Information



Registration Fees	Registration Checklist
<p><u>Class Fees</u></p> <p>4-Day Student (Full) \$450 _____</p> <p>-OR- Minimum Due Now \$250 _____</p> <p>2-Day Student \$315 _____</p> <p>(Entire amount is due now)</p> <p><u>Saturday Mini-Class</u> \$45 _____</p> <p><u>Non-EGA Member Fee</u> \$50 _____</p> <p><u>Merchandise Night Tables</u></p> <p> Full Tables \$60 _____</p> <p> Half Table \$30 _____</p> <p> Chapter Table \$25 _____</p> <p> Teachers (full or half table) \$50/30 _____</p> <p><u>Seminar Souvenir Pin</u> _____ x \$8 _____</p> <p><u>Guest Banquet Tickets</u></p> <p>(Seminar fees include both banquets)</p> <p> Opening Banquet Guests _____ x \$50 _____</p> <p> Closing Banquet Guests _____ x \$50 _____</p> <p><u>Late Registration Fee</u></p> <p>(After December 31, 2016) \$50 _____</p> <p><u>Less Early-Registration Deposit Paid</u> (\$50) _____</p> <p style="text-align: center;">=====</p> <p>Total Due (with this form) \$ _____</p> <p><i>You must sign and date this form below.</i></p>	<p>Have you enclosed:</p> <p>_____ completed and signed Registration Form?</p> <p>_____ completed Fee Schedule?</p> <p>_____ check or money order (US Funds)? payable to "GLR Seminar 2017"</p> <p style="text-align: center;">Any returned checks will incur a \$40 processing fee, and your registration will be delayed.</p> <hr/> <p>Are you:</p> <p>_____ a first-time GLR seminar attendee?</p> <p>_____ willing to be a classroom angel?</p> <p>_____ willing to volunteer for other seminar activities? (e.g., registration, exhibit, meals, etc.)?</p> <p>_____ an officer or hold a position in your chapter or on GLR Board?</p> <p>_____ If so, what position(s)? _____</p> <hr/> <p>Do you:</p> <p>_____ need a Roomate List?</p> <p>_____ wish to exhibit at the Great Lakes Region Needlearts Exhibit?</p> <p>_____ plan to participate in the Teacher's Showcase?</p> <p>_____ have special dietary needs? If so, describe below: _____ _____</p> <p style="text-align: center;"><i>All listed dietary needs will be forwarded to the hotel's staff, who will try their best to meet your needs.</i></p> <hr/> <p>Please make a copy of this form for your records and send completed form with payment to the following address:</p> <p style="text-align: center;">Marilyn Klehm Martin, Registrar 5947 N. Newark Ave. Chicago, IL 60631-3143</p> <p>E-mail questions to Seminar2017@ega-qlr.org Please put GLR Seminar 2017 in subject line</p>

Reminder: You must be a registered guest at the Chicago Marriott O'Hare to participate in GLR Seminar 2017. Call the hotel directly at 773-693-4444, toll-free 866-614-8407 or visit their website <http://www.marriott.com/hotels/hotel-photos/chiap-chicago-marriott-ohare/> to make your reservations. Be sure to ask for the "GLR 2017 Embroiderers Guild" rate.

All listed dietary needs on the above form 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. and the Great Lakes Region 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 2017.

I understand that cancellations must be made in writing, by Priority Mail with signature confirmation, to the Registrar by February 1, 2017. **NO REFUND REQUEST WILL BE CONSIDERED** after February 1, 2017.

Signature _____ Date _____