



## MATSOL 40<sup>th</sup> Anniversary Conference, May 2-4, 2012

### Instructions

1. Complete *Part 1: Registration Summary* (page 3).
  - Include contact information for the person submitting the registration. This is the person we will receive registration confirmation and be contacted if there is a problem
  - List all number of registrants and payment due.
  
2. Complete the *Part 2: Individual Registration* with membership information for each registrant (page 4)
  - Only current members can register at the member rate. Registrations submitted at the incorrect rate will not be processed until there is full payment. Contact matsol@matsol.org with questions about membership status.
  - Include an individual e-mail address for registration confirmation.
  - Include membership information for people joining MATSOL.
  
3. Mail the all the completed Registration Forms (Parts 1 and 2) together with a signed purchase order or check to: MATSOL, 2 Canton Street, Suite B-223, Stoughton, MA 02072. See page 2 for payment policies.

### Registration Fees

Use the worksheet below to determine the registration fee for each person. Any registrations made for the incorrect amount will be returned.

- All 2010-11 MATSOL memberships expired on September 30, 2011. Only current members, renewed after 9/1/11, can register at the “Current Member” rate. All renewing members and non-members must register at the “Join or Renew Membership” rate (which includes MATSOL membership) or “No Membership” rate (which includes conference registration only).
- Registrations must be postmarked by January 15, 2012 to receive the “Early Registration” rate.

Conference Pricing Worksheet	Early Registration			Regular Registration		
	Until Jan 15, 2012			After Jan 15, 2012		
Membership Status	Current Member	Join or Renew Membership	No Membership	Current Member	Join or Renew Membership	No Membership
Conference -- 1 day: Thursday <u>or</u> Friday	\$120	\$160	\$160	\$140	\$180	\$180
Add PCI: Co-Teaching/Collaboration	\$320	\$360	\$400	\$360	\$400	\$440
Add PCI: RTI in Practice	\$250	\$290	\$330	\$290	\$330	\$370
Conference -- 2 days: Thursday <u>and</u> Friday	\$220	\$260	\$260	\$260	\$300	\$300
Add PCI: Co-Teaching/Collaboration	\$420	\$460	\$500	\$480	\$520	\$560
Add PCI: RTI in Practice	\$350	\$390	\$430	\$410	\$450	\$490
PCI Only – No Conference Registration						
Co-Teaching/Collaboration	\$200	\$240	\$240	\$220	\$260	\$260
RTI in Practice	\$130	\$170	\$170	\$150	\$190	\$190

### Presenter Discount – Subtract \$60 from the total

Accepted conference presenters can receive a \$60 discount off the total registration price (equal to 50% off the early rate for 1 day conference registration). Up to two presenters per presentation are eligible to receive the discount. Presenter discounts must be verified by the MATSOL office.



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### Registration Deadlines

Please register early! Registrations are made first come, first served.

- Early registration period: until January 15, 2012
- Registrations paid by Purchase Order: March 15, 2012
- Registrations paid by check or made online: April 15 or when the conference is filled.

### Only Complete Registrations will be processed.

A *complete registration* includes submission of all required forms (*Part 1: Registration Summary* and *Part 2: Individual Registration* for each person) plus a signed purchase order or check payment. Incomplete registrations will not be processed.

### Registration Confirmation

The contact person listed on the registration will receive mailed confirmation of registration. Individual registrants will receive confirmation by e-mail. Individual email addresses are required for registration.

### Waiting List and Conference Sell-Out Information

A waiting list will be established as soon as the conference sells out. Notification of conference sellout will be posted on the MATSOL website at [www.matsol.org](http://www.matsol.org).

### Purchase Order Payment

Purchase Orders will be accepted until March 15, 2012.

- The required registration forms must accompany the purchase order.
- List the names of all participants on the purchase order.
- A purchase order is considered a promise of payment in lieu of immediate advanced payment by check to hold a space in the conference. "No-shows" will be expected to pay for the conference and will be billed in full.
- No internal requisition numbers in lieu of PO.
- Please mail the registration to the MATSOL office.
- MATSOL will send an invoice upon receipt of the purchase order and registration forms. Please allow 1-2 weeks for processing.

### Check Payment

Make checks payable to "MATSOL." If your check is returned for non-sufficient funds, you expressly authorize your account to be electronically debited or bank drafted for the amount of the check plus an applicable fees. The use of a check for payment is your acknowledgement and acceptance of this policy and it's terms and conditions (see [www.checkvelocity.com](http://www.checkvelocity.com)).

### Cancellation & Refund Policy

- Changes in names of participants, if necessary, will be accepted until April 15, 2012.
- Full refunds for the event can be provided up until March 15, 2012. Refunds must be requested in writing (by email or fax) no later than March 15, 2012.
- "No-shows" on the day of the conference must pay for the registration and will be billed in full.

### MATSOL Billing Address

Please note that our office is only staffed part time, so the best way to contact us is via email. We will respond to your query as soon as possible.

Massachusetts Association of Teachers of Speakers of Other Languages (MATSOL)  
2 Canton Street, Suite B-223  
Stoughton MA 02072

email: [matsol@matsol.org](mailto:matsol@matsol.org)  
phone: 617-820-5099  
fax: 617-395-2687

### MATSOL W-9/Vendor Information

MATSOL EIN/Tax ID#: 4-3581597. A W-9 form for MATSOL will be sent with invoices. MATSOL is a 501(C)3 non-profit organization.

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## PART 1: Registration Summary

**Institution/District Name:**

**Contact Person:**

*The contact person will receive registration confirmation by mail and will be contacted in case of problems.*

**Phone:**

**Email:**

**Registration Type:**      Early (until 1/15/12)      Regular (after 1/15/12)

Name	Membership	Conference	PCI	Presenter	Price
1.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
2.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
3.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
4.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
5.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
6.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
7.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
8.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
9.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	
10.	Current Join/Renew None	1 day: Thu 1 day: Fri 2 days: Thu-Fri None	Co-Teaching RTI in Practice None	No Yes	

**TOTAL PRICE**

**Payment by      PO      Check**

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**PART 2: Individual Registration Form**

*Copy this page if needed to add more registrations.*

Membership/Registration Information

Name:

Email (required):

Address:

Home

Work

Address:

City:

State:

Zip:

Phone:

Professional Affiliation (for your badge):

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**REGISTRATION**

**Membership Status**

Current Member (renewed after 9/1/11)

Join or Renew MATSOL Membership

No Membership

**Conference** (choose one)

1 day – Thursday only

1 day – Friday only

2 days – Thursday & Friday

No conference registration

**Pre-Conference Institute** (choose one)

Co-Teaching and Collaboration

RTI in Practice

No PCI registration

**Are you a presenter?** Yes No Presentation title:

**Is this your first MATSOL Conference?** Yes No

Check to request a vegetarian meal.

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*For New or Renewing Members only*

**Professional Affiliation**

Title:

School or Program:

District or Institution:

Choose **two** Special Interest Groups (SIGs):

**First Choice**

Elementary

Secondary

Low Incidence

Dual-Language

Bilingual Special Ed

Adult ESOL

Workplace ESOL

Higher Education ESOL

**Second Choice**

Elementary

Secondary

Low Incidence

Dual-Language

Bilingual Special Ed

Adult ESOL

Workplace ESOL

Higher Education ESOL