Association for Non-Traditional Students in Higher Education
Second Annual Conference -- San Diego, California, October 2-4, 1998
Celebrating the Non-Traditional Student in Higher Education
Conference Registration
One registration per form. For additional registrations, please duplicate this form

1. Name of attendee _____
                 last   first   MI

Name for nametag, if different from above:_____

Institution/Affiliation _____

☐ Student   ☐ Professional/Administrator

    Major _____   Title _____

    Expected Graduation Date _____   Department _____

2. Address _____   ☐ Home Address

City, State ZIP_____   ☐ Work Address

Daytime Telephone (_____)_____

Evening Telephone (_____)_____

Fax number (_____)_____

E-mail Address _____

3. Conference Fees

	Member Reg before 9/11/98	*Non-member* Reg before 9/11/98	*Member* Reg after 9/11/98	*Non-Member* Reg after 9/11/98	Basic Web Design Pre-Conference Workshop	True Colors Pre-Conference Workshop
Student	$ 40	$ 50	$ 55	$ 65	$ 10	$ 10
Professional	$ 90	$110	$125	$145	$ 20	$ 20

(note: $15 cancellation fee does apply)

Please circle the appropriate fees, and total here: $ _____

4. ANTSHE Membership

Members will benefit from networking opportunities, a newsletter, national conferences, access to information resources, career enhancement, personal and professional development opportunities, scholarship opportunities, links to other professionals, organizations and students in your region, mentorship support, and the opportunity to present and develop workshops for conference presentation.

    ☐ Institutional Membership: $200
    ☐ Student Membership: $ 10
    ☐ Alumnus Membership: $20
    ☐ Academic Professional Membership: $40
    ☐ Friend Membership $50

5. Payment

    Conference fees: $ _____

    Membership fees: $ _____

    TOTAL DUE: $ _____

Method of Payment

☐ Check payable to *ANTSHE*

☐ Purchase Order (please include PO and billing information)

☐ Bill my organization; Attn: _____

_____

6. Meals (the following meals are included in your conference fees) please check if you will attend:

    ☐ Saturday lunch
    ☐ Sunday buffet breakfast
    ☐ CARE Viticulture Reception

7. Mail this form with payment or payment information, to:
    ANTSHE
    c/o Office of Continuing Education
    Joyner House
    Miami University
    Oxford, OH 45056

If you have questions regarding registration, please call:
(513) 529-1827, or write antshe@mesastate.edu

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