

ICDA 2008 SUMMER CONVENTION AND SYMPOSIUM PRE-REGISTRATION FORM

Office Use Only

Date rec'd

Total rec'd

Check #

Name (as desired on badge) _____

Home Address _____

City/State/Zip _____

Phone _____ E-mail _____

Institution (as desired on badge) _____

Institution Address _____

City/State/Zip _____

Summer Phone _____ **Summer E-mail _____

___ **This will be my first, full-time job.** ___ **This will be my first ICDA Convention.**

First Year Teacher:

___ 1st yr Teacher Fall 08 & did not attend 2007 Convention – eligible for a \$200 reimbursement from the Iowa Dep. of Education

Pre-Registration Fee (postmark deadline)

	<i>July 1</i>	<i>At Door</i>	\$ _____
___ ACDA Member *Includes music packet (member number) _____ Exp.Date _____	\$250.00	\$340.00	\$ _____
___ Non-ACDA Spouse *does not include a music packet	\$50.00	\$70.00	\$ _____
___ Non-ACDA Member (Also requires ACDA membership form)	\$340.00	\$425.00	\$ _____
___ ICDA Student Member with no teaching experience	\$40.00	\$50.00	\$ _____
___ Retired Teacher/ Student with prior teaching experience	\$130.00	\$160.00	\$ _____

Single Day Plans *The following rates do not include a music packet:*

___ Retired ACDA Member Single Day Fee	\$45.00	\$65.00	\$ _____
___ Single Day (Meals Not Included) Circle Day: M T W TH	\$90.00	\$120.00	\$ _____
___ Lunch Plan only Monday-Thursday (commuters only)	\$40.00	\$40.00	\$ _____

Housing and Meals

___ Comprehensive Fee	Housing is available Sunday night-Wednesday night Meals are available Mon breakfast-Thurs lunch	\$150.00	\$ _____
___ Linen Service	Pillowcase, 2 sheets and towels - pre-registration only	\$20.00	\$ _____
___ Single Room	Extra charge - standard housing is two per room.	\$30.00	\$ _____

Roommate selection, I request to room with _____

Grand total: \$ _____

1. **Purchase orders** will **NOT** be accepted with this form.
2. Please make your check payable to: **IOWA CHORAL DIRECTORS ASSOCIATION, INC.**
Mail this form and payment to: **Iowa Choral Directors Association, Inc.**
Joleen Nelson Woods, Executive Secretary/Treasurer
209 Oak Ridge Drive
Mount Vernon, IA 52314
3. If postmarked after July 1, the "at door" fee will be applied and the remaining balance will be due at registration. All receipts and schedules will be provided at the registration desk.
4. Pre-registrants will be refunded REGISTRATION ONLY after July 1, 2008
5. Convention Location: North Iowa Area Community College (NIACC), Mason City, Iowa
6. Registration and Check-in: Sunday, July 20, 2:00-5:00 PM (Residence Hall Cafeteria) and Monday, July 21, 8:00 AM (Auditorium Lobby).
7. No pillows, blankets, lamps or fans are provided. The residence halls are not air-conditioned.
8. **You will receive confirmation of your registration via your summer email if provided.

Questions? Contact:

Dr. Brad Barrett
319-273-6113
convention08@iowachoral.org

Matt Huth
402-659-5747
president@iowachoral.org

***NO REGISTRATION REFUNDS
AFTER JULY, 21, 2008!***

READING SESSION PACKETS ARE ONLY GUARANTEED WITH Full-week PRE-REGISTRATION!