

**ICDA 2017 SUMMER SYMPOSIUM—JULY 24-27
PRE-REGISTRATION FORM**

Office Use Only Date rec'd
Total rec'd
Check #

Name (as desired on badge) _____
 ACDA Member Number _____ Expiration _____
 (Member pricing requires current ACDA membership both at time of registration and during event.)
 Home Address _____ City/State/Zip _____
 Summer Phone _____ Summer E-mail (registration confirmation sent here) _____
 Institution (as desired on badge) _____

I am interested in being a part of the following directors' choirs: Treble Clef _____ Bass Clef _____ Worship _____
 and I prefer to sing the following voice part: S _____ A _____ T _____ B _____

Check All That Apply: _____ 1st year teacher Fall 2017 _____ 1st year teacher Fall 2016 _____ 1st ICDA Symposium

MEMBER PRICING

Pre-Registration Fee (Postmark deadline)	July 1	At Door	
___ ACDA Member (Includes music packet)	\$300.00	\$400.00	\$ _____
___ Retired Teacher/Student (With prior teaching experience)	\$135.00	\$165.00	\$ _____
___ ICDA Student Member (With no teaching experience)	\$45.00	\$55.00	\$ _____
___ Single Day* - Circle Day (one) M T W TH	\$155.00	\$205.00	\$ _____
___ Retired ACDA Member Single Day* - Circle Day (one) M T W TH	\$50.00	\$70.00	\$ _____

NON-MEMBER PRICING (All except spouse require completed membership form)

___ Non-ACDA Member	\$430.00	\$530.00	\$ _____
___ Non-ACDA Retired/Student (With prior teaching experience)	\$180.00	\$210.00	\$ _____
___ Non-ACDA Student (With no teaching experience)	\$80.00	\$90.00	\$ _____
___ Non-ACDA Member Single Day* - Circle Day (one) M T W TH	\$285.00	\$335.00	\$ _____
___ Non-ACDA Retired Single Day* - Circle Day (one) M T W TH	\$95.00	\$115.00	\$ _____
___ Non-ACDA Spouse (Does not include a music packet)	\$50.00	\$70.00	\$ _____

HOUSING AND MEALS (All registration types)

___ Double Room Housing Mon-Wed night; Meals Mon dinner-Thurs lunch	\$165.00	\$215.00	\$ _____
Roommate selection, I request to room with _____			
___ Single Room Housing Mon-Wed night; Meals Mon dinner-Thurs lunch	\$200.00	\$250.00	\$ _____
___ Linens (pre-registration only)	\$7.50		\$ _____
___ Full meal plan without housing: Mon dinner-Thurs lunch	\$75.00	\$75.00	\$ _____
___ Additional Sunday night room (no meals) Single \$35, Double \$25 (check in 4-5p)			\$ _____
Grand total:			\$ _____

*****PAYMENT OPTIONS – NO PURCHASE ORDERS – CREDIT CARDS OR CHECKS ONLY*****

1. Credit Card Number: _____ Expiration Date: _____

CVV (3-digit or 4-digit security code): _____ Billing Address Zip Code: _____

Forms with credit card payments may be faxed to (319) 895-8443 or scanned and sent via e-mail to icda.woods@mchsi.com.

2. Or, make your check payable to: **IOWA CHORAL DIRECTORS ASSOCIATION, INC.**

Mail this form with payment to: **Iowa Choral Directors Association, Inc.**

**Joleen Nelson Woods, Executive Secretary/Treasurer
209 Oak Ridge Drive SE, 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. REGISTRATION FEES ONLY will be refunded after July 1, 2017.

5. Convention Location: Central College, Pella, Iowa

6. Registration and Check-in: Monday, July 24, 10:00 AM-1:00 PM (Graham Conference Center).

7. Please note we are unable to accommodate unique dietary restrictions.

<p><i>Questions? Send me a note!</i></p> <p>Sarah Bouska</p> <p>symposium17@iowachoral.org and sbouska@masoncyncyschools.org</p>

*****NO REGISTRATION REFUNDS
AFTER JULY 23, 2017*****