

Registration for the NWIWP 15th Anniversary Celebration

*Blue Chip Hotel & Spa
Michigan City, IN
October 1 - 2, 2010*

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (home) _____ (cell) _____ E-mail: _____

School System: _____ School: _____

I attended Summer Institute in _____. (year)

I will attend the dinner & Cabaret. Yes No

I will attend the Saturday workshop. Yes No

My registration fee is enclosed. (\$139 \$125 Other _____) Yes No

Please make checks payable to "Purdue University Calumet" with "NWIWP" in the memo line.

I am bringing a guest: (name) _____ Yes No

The cost for my guest is included in my check. Yes No

I would like to receive CRUs. Yes No

Room Reservations[†]

I would like an overnight reservation. Yes No

Please indicate your preference for the following:

- I have a roommate.
- I would like to be assigned a roommate.
- I do not wish a roommate.*

If you have a roommate, please complete the following:

My roommate is a TC: (name) _____ Yes No**

[†]Cancellation charge: If you cancel your reservation after September 24 and we cannot fill the room, you will be charged for the room (\$135).

*It is understood that if you want a single room, you are responsible for paying the cost of the other half of the room (\$70).

**It is understood that if your guest is not a TC, you are responsible for paying the cost of the person's dinner (\$30) and half of the room charge (\$70).

Early Registration Deadline (\$125): August 27, 2010

Final Deadline: September 15, 2010

Signature: _____ Date: _____