

SAVE A STAMP! REGISTER ONLINE at <https://iamea.org> and pay with credit card.

Mail completed form with payment to:
Emily Cox, IMEA Registrar
2904 South Coral
Sioux City, IA 51106



MUSIC EDUCATORS ASSOCIATION

A FEDERATED STATE ASSOCIATION OF
THE NATIONAL ASSOCIATION FOR MUSIC EDUCATION

2018 Professional Development Conference :: Nov. 15, 16, 17 :: Ames, IA

Name (to appear on badge) _____ School District (if applicable) _____

School Address _____ City, State, Zip _____

School Phone (____) _____ School E-mail _____

IMEA/NAfME Member? No Yes *Member # _____ *Exp. Date _____ *to receive member rate

Teaching Area: General Music Band Chorus Orchestra Other _____

Teaching Level: Pre-K Elementary Middle School/Jr. High High School College/Univ.

College/University Students only: Current Year _____ NAfME Collegiate Chapter _____

		Pre-Registration Postmarked on or before Nov. 1		On-Site (Only Option after Nov. 1 Deadline)
Full (3 day) CONFERENCE Registration	NON IMEA or NAfME Collegiate MEMBER	Educator	\$100.00	\$120.00
		1st Year Educator	\$50.00	\$70.00
		College/University Student	\$40.00	\$60.00
	<i>Friday Lunch Special - Catered hamburger or grilled chicken sandwich with sides - Available to all Attendees</i>		\$17.00	<i>Unavailable</i>
	IMEA or NAfME Collegiate MEMBER	Educator	\$50.00	\$70.00
		1st Year Educator	No Charge	No Charge
		College/University Student	\$25.00	\$45.00
Request for a refund less a \$10 service fee must be received in writing prior to November 1, 2018.		Guest Name _____	\$50.00	\$70.00
		Retired	No Charge	No Charge
THURSDAY ONLY REGISTRATION		All Attendees	\$30.00	\$30.00
FRIDAY ONLY OR SATURDAY ONLY CONFERENCE REGISTRATION		Educator	\$75.00	\$95.00
		College/University Student	\$25.00	\$45.00
PRE REGISTRATION DEADLINE POSTMARK DEADLINE: THURSDAY, NOVEMBER 1, 2018		Registration Total	\$	

PAY BY CREDIT CARD (complete this box—please print legibly) **PAY BY CHECK** (enclose check) **PAY BY CASH**

NAME AS IT APPEARS ON CARD (FIRST AND LAST NAME) _____

SIGNATURE _____

MASTERCARD VISA CARD NUMBER _____ - _____ - _____ EXP. DATE _____

Address associated with card _____ City, State, Zip _____

Email associated with card _____ Phone # associated with card (____) _____

Hotel Information: To receive discount, specify IMEA when reserving rooms. Space is limited. Reserve before Oct. 20, 2018
GRANDSTAY AMES :: 1606 S. Kellogg Avenue : 515-232-8363
HOLIDAY INN EXPRESS :: 2600 E. 13th Street : 515-232-2300

JOIN OR RENEW NAfME/IMEA

If you wish to join NAfME/IMEA or renew your membership, visit music.ed.nafme.org/join.
When renewing/joining online, please attach membership confirmation email to this form to qualify for member rates.

OFFICE USE ONLY:
Method of Payment Cash
 Visa/MasterCard* Check

Amount Paid \$ _____ Date _____