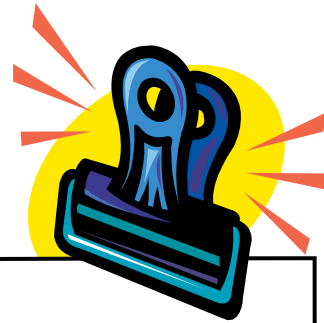


November 2009 & March 2010 Intermediate Professional Development Registration



Name _____

E-mail Address (required) _____

Telephone _____ Fax _____

School _____

School District _____ Principal _____

School Address _____

Billing Address (if different) _____

Literacy Collaborative Site Coordinator _____

All registrations **must** include either a P.O./credit card # or a check made payable to:
The Ohio State University - Literacy Collaborative

Purchase Order #/Credit Card # _____

Credit Card Type: Visa MasterCard Expiration Date _____

Signature (required) _____ Date _____

Location: 807 Kinnear Road, Columbus, Ohio 43212

Dates: November 9-11, 2009 & March 15-17, 2010

Times: 9:00 a.m. - 4:00 p.m. (Nov. 9-10 & Mar. 15-16)
9:00 a.m. - 12:00 p.m. (Nov. 11 & Mar. 17)

Cost: \$1,420 (Includes both professional developments and affiliation fee, which should be submitted on one P.O.)

Special lodging available at the Homewood Suites in Dublin

Phone: 614.791.8675 ■ Toll Free: 800.225.5466

Mention that you are with Literacy Collaborative when making your reservation

*Registrations cancelled two weeks prior to an event are subject to a full refund. Registrations cancelled between 48 hours and 2 weeks of an event will be subject to a cancellation fee of 25% of the registration fees. No refund will be given for registrations cancelled within 48 hours of an event or for no-shows.

Please return this form to:

The Ohio State University Literacy Collaborative

Attn: Diann Guy

807 Kinnear Road, Columbus, OH 43212

614.292.7893 ■ 800.678.6486 ■ fax: 614.688.3980 ■ guy.81@osu.edu ■ www.lcosu.org