



PHI DELTA KAPPA • WA CHAPTER
Event Registration Form

EVENT: **Creating Safe and Successful Learning Communities**

PLACE: **Clover Park
11023 Gravelly Lake Drive SW, Lakewood, WA**

DATE: **April 21, 2006** TIME: **9:00 A.M. – 2:00 P.M.**

ATTENDEE: _____
 Last Name First Name Badge Name

 Position/Title School/District or Organization

PHI DELTA KAPP CHAPTER AFFILIATION: _____
 (PDKI membership is not required to attend this event)

ADDRESS (Indicate work or Home): _____

CITY/STATE: _____ ZIP: _____

WORK PHONE: _____ HOME PHONE: _____

E-MAIL: _____ FAX: _____

GUEST: _____
 Last Name First Name Badge Name

REGISTRATION:

Fees: Single person \$20, Group rate (3 or more) \$15, Graduate students \$10

EVENT	#ATTENDING	COST	TOTAL
Creating Safe and Successful Learning Communities			
	TOTAL AMOUNT ENCLOSED:		

METHOD OF PAYMENT:

CASH CHECK (payable to PDK, WA State Chapter)

PURCHASE ORDER (may fax to Dr. John Armenia, 425-709-5363)

CREDIT CARD: VISA MasterCard American Express

Account Number _____ Expiration Date _____

Name on Card _____ Signature _____

Please make your reservations now. To register, please complete the application form and mail, fax or e-mail: Dr. John Armenia, 11900 NE 1st Street, Bellevue, WA, 98005; jarmania@cityu.edu; FX: 425-709-5363. If questions, please contact John at 800-426-5596.