



The Delta Kappa Gamma Society International
Alpha Iota State Convention Registration Form
Education: Our Focus, Our Future
May 2-4, 2014
Grand Hotel - Mackinac Island

Please Print: Use one form for each person
 Registration will NOT be valid unless completed on both sides.

Name _____ Chapter _____

Mailing Address _____ City _____

State _____ Zip _____ Phone _____ E-mail _____

Present Office: Chapter _____ State _____ International _____

REGISTRATION FEE Postmarked by April 2, 2014	Members \$55 Non-Members \$75	\$ _____
Postmarked after April 2, 2014	LATE FEE \$20	\$ _____
If you are a guest staying at Grand Hotel, breakfast, dinner, and snacks each day are included in hotel fees.		\$ _____ 0 _____
<u>If you are NOT staying at Grand Hotel</u> and wish to join us for meals, payment must be made with registration form. Friday Dinner @ \$80 6:30 – 8:45 PM Saturday Breakfast @ \$40 7:30 – 8:50 AM President's Banquet @ \$80 Saturday 7:00 PM All members and guests are invited to attend. Sunday Awards Brunch @ \$40 Sunday 9:00 AM All members and guests are invited to attend Coffee, Snacks , if NOT staying at Grand Hotel @ \$5	Are you staying at the Grand Hotel? → → → Yes No Yes No Yes No Yes No Yes No	Yes No \$ _____ (\$80) \$ _____ (\$30) \$ _____ (\$80) \$ _____ (\$30) \$ _____ (\$5)
Special Fees: Kitchen Tour (Saturday, after workshops, 2:30 PM) @ \$5	Yes No	\$ _____ (\$5)
Corsage Order (Complete the form on the next page.)	Each \$15	\$ _____
SB-CECHs : Certified Educational Units fee Non-member Fee	\$10 \$20	\$ _____
Total amount enclosed: Check payable to Delta Kappa Gamma		\$ _____

Society Membership/Leadership History: Please check all that apply

Years of Membership _____ Is this your first Convention? Yes ___ No ___

If "Yes", please attend the First Timer's Orientation Friday.

Will you be in the Presidents' Procession? Yes, as Incoming Pres. ___ / Outgoing Pres. ___ No ___

Will you substitute for our chapter president at Executive Board and Presidents' Procession? Yes ___ No ___

Will you attend Chapter Leadership Development? Yes ___ No ___ For what position? _____

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Corsage Orders: (\$15 each)

Person ordering _____ Chapter _____

Ordered for whom _____

All corsages will be wrist worn.

Number ordered _____ Total (number ordered @\$15 each) \$ _____ Please record on previous page.

Dietary Needs:

Dietary needs must be listed on this registration form in order to inform the hotel staff of your special needs. If you sign up for a special meal, please do not switch your selection at the banquet since the meal count is predetermined by registration. Special tickets will be provided in the registration packets of those who indicate the following needs. CHECK DIETARY NEED, IF NECESSARY:

Vegetarian _____ *Diabetic:* _____

Handicap Assistance:

There is elevator service to guest rooms. If you require special guest room accommodations, please notify the hotel staff directly when you make your overnight reservations.

Photo Release: By your attendance at this event you are granting permission to Alpha Iota State of The Delta Kappa Gamma Society International to use your photograph in the *Wolverine* and/or on the Society website.”

In order to earn the State Continuing Education Clock Hours (SCECHs) you must do the following:

1. Register for the Credit on your registration form. (Fee is \$10 for member, \$20 for non-member.)
2. Sign in for SCECHs at the registration desk when you check in. (State Required Form)
A sheet will be in your packet.
3. Attend a minimum of five sessions for credit.
4. Assure that you are stamped in and stamped out of each session. (You must attend the entire session.)
5. Turn in your Official Attendance Sheet and your evaluation sheet. There will be a special box at the registration desk for this purpose.

- The Executive Board and General Membership Meeting will be *combined* and will start at 9:00 PM Friday evening.
- ALL MEMBERS should attend Executive Board/General Membership Meeting at 9:00 PM Friday.
- Practice for the President’s Procession will be Friday night following Executive Board.

To help us “go green” please bring your neck wallet name badge holders. If you do not have one, or you forget it, plastic holders will be available.

Please mail this completed form and your check, payable to Delta Kappa Gamma to:

Patricia Wittler, Registrar
124 County Road 545
Marquette, MI 49855
Phone: 906-249-9626
Wit64ler@aol.com

Cancellation Policy:

“A person having to cancel will receive a refund provided her written request is posted *fifteen* days prior to the event” which would be **April 17, 2014**. (Standing rule 7:01 of the Delta Kappa Gamma Society International.) Requests for cancellations must be sent in writing to the same person to whom the registration form was sent. You must personally cancel your hotel accommodations. If it is necessary to cancel after April 17, 2014, you should attempt to get someone from your chapter to attend in your place. No refunds can be made after the cancellation date.

NOTE: HOTEL REGISTRATIONS ARE DUE BY APRIL 2, 2014 FOR GUARANTEE OF LOWEST AVAILABLE PRICE.