

Transition: A Brighter Future 2007 TAVAC Annual Conference

Please complete all blanks. Please use one form per registrant.

Last Name _____ First Name _____

School/Workplace _____ Position _____

Work Address _____ City _____ Zip _____

Home Address _____ City _____ Zip _____

School County _____ ESC Region _____ TAVAC Region _____

Work Phone (_____) _____ Home Phone (_____) _____

E-Mail _____

(Confirmation letters will be sent upon receipt of payment or purchase order.)

Registration Fees

Conference (Monday, July 30 – August 2, 2007) \$ 175.00 \$ _____

Late Conference Registration (after July 1, 2007) \$ 200.00 \$ _____

Single day rate - if not attending full conference
(Please indicate which day(s) _____) \$ 100.00 \$ _____

TAVAC Membership dues (2007 – 08) \$ 25.00 \$ _____

Scholarship Dinner (July 31) Ticket for attendee \$ 10.00 \$ _____
Guest tickets can be purchased at conference for \$25.00 each. Attendee tickets will also be available for purchase at conference if not purchased with registration.

TOTAL REMITTED \$ _____

Employer Tax ID # 74-2073527

Written requests for a refund must be postmarked by **July 1, 2007**

Send this form, along with your check to:
Please make checks payable to TAVAC.

**Mary Stovall
10755 Mountain View Road
Whitehouse, Texas 75791**

Questions about registration should be directed to:

Mary Stovall: 903 839-9258 OR mestovall@suddenlink.net

Special Accommodations Needed

_____ Sign Language Interpreter _____ Accessibility _____ Large Print
_____ Braille _____ Other _____