



**ATTENDEE INFORMATION**

Full Name: \_\_\_\_\_

First Name/Nickname for badge: \_\_\_\_\_

College/Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

Is this the first time you have attended DREAM?  Yes  No

Please indicate any dietary needs:  Vegetarian  Vegan  Gluten-free  N/A Other (e.g., food allergies) \_\_\_\_\_

Please list any ADA-specific aids or services you require: \_\_\_\_\_

**PREFERRED EMERGENCY CONTACT:**

Please enter the first and last name: \_\_\_\_\_

Emergency Contact Phone Number \_\_\_\_\_ Relationship: \_\_\_\_\_

**Your Organization Type**

- College
- Foundation
- Nonprofit Organization
- Corporation
- Other

**What is your ATD Role? Please select all that apply.**

- ATD College
- Leader College
- Leadership Coach
- Data Coach
- Founding Partner
- State Organization
- Funder
- External
- Invited Speaker
- ATD Staff
- Prospective ATD
- College
- Student
- Guest

**Your College Role (if applicable)**

- President/Chancellor/CEO
- Cabinet Member
- Dean/Director/AVP
- Faculty
- Student
- Staff

**Your College Functional Area (if applicable)**

- Academic Affairs
- Student Services
- Continuing Education
- Institutional Research
- Information Technology

**SPECIAL FUNCTIONS:**

I plan to attend Tuesday evening's Opening Reception  Yes  No

For Presidents Only: I plan to attend Wednesday's President's Colloquium Luncheon:  Yes  No

## CONFERENCE FEES

### Registration Fees for **ATD NETWORK COLLEGES** (All fees listed in U.S. Funds.)

PLEASE CHECK APPROPRIATE REGISTRATION FEE:

RECEIVED BY  
DECEMBER 13

AFTER DECEMBER 13

Full Annual Meeting	<input type="checkbox"/> \$695	<input type="checkbox"/> \$815
Wednesday Only including Tuesday Reception	<input type="checkbox"/> \$435	<input type="checkbox"/> \$435
Wednesday Only	<input type="checkbox"/> \$395	<input type="checkbox"/> \$395
Thursday Only	<input type="checkbox"/> \$395	<input type="checkbox"/> \$395

### Registration Fees for **OUT-OF-NETWORK ORGANIZATIONS** (All fees listed in U.S. Funds.)

PLEASE CHECK APPROPRIATE REGISTRATION FEE:

RECEIVED BY  
DECEMBER 13

AFTER DECEMBER 13

Full Annual Meeting	<input type="checkbox"/> \$860	<input type="checkbox"/> \$970
Wednesday Rate including Tuesday Reception	<input type="checkbox"/> \$485	<input type="checkbox"/> \$485
Wednesday Only	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495
Thursday Only	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495

### Pre-Conference Workshops (Tuesday, February 19)

	NETWORK COLLEGE	OUT-OF-NETWORK ORGANIZATION
<b>9:00 am-Noon</b>		
Designing Faculty Professional Development for Student Success	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
Holistic Student Supports	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
Strategic Communication for Impact	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
Connecting Students to Employers and Careers	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
<b>Noon-4:00 p.m.</b>		
Answering the Call for Better Data through the Postsecondary Data Partnership	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
<b>1:00-4:00 p.m.</b>		
Building Partnerships for Supporting Students: Mapping Resources In Your Community	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
Focusing on the Adult Learner	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
Leading Your College in the ATD Work	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
The OER Experience: Interactive OER Workshop	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
The Unwritten Rules of College: Transparency and Its Impact on Learning	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225
<b>7:30 am-4:00 p.m.</b>		
The Equity Institute with DREAM 2019 Attendance	<input type="checkbox"/> \$400	<input type="checkbox"/> \$475
The Equity Institute (Only)	<input type="checkbox"/> \$500	<input type="checkbox"/> \$595
<b>9:00 am-4:00 p.m.</b>		
TCU Pre-Conference Workshop	<input type="checkbox"/> No charge	<input type="checkbox"/> No charge

Registration Fee \$ \_\_\_\_\_

*Group Discount (does not apply to Pre-Conference Workshops):*

*Subtract 10% if submitting at least three registrations from your organization* -\$ \_\_\_\_\_

Pre-Conference Workshop(s) Fee \$ \_\_\_\_\_

Total Registration Fee \$ \_\_\_\_\_

Discount Code, if applicable: \_\_\_\_\_

**Cancellations/Changes and Refunds:** Fees for missed meals, late arrivals, and early departures will not be refunded. **Fees will be refunded, less a \$250.00 processing fee, if cancellation or change resulting in a refund is received in writing no later than February 1, 2019.** After that date, fees are non-refundable (including no-shows). Substitutions are allowed at no charge

**Payment Method:** Check or Money Order payable to: **Achieving the Dream.** Your registration confirmation/receipt will be sent via email.

Please check appropriate box:  Check     Money Order     VISA     MasterCard     American Express

Print Cardholder Name: \_\_\_\_\_

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Please mail or fax completed registration form with payment to:**

DREAM 2018  
Achieving the Dream  
8484 Georgia Avenue, 5<sup>th</sup> floor  
Silver Spring, MD 20910

Phone: 240-450-0075  
FAX: 240-450-0076  
Email: [events@achievingthedream.org](mailto:events@achievingthedream.org)