

*Registration Form
EERC/OWP Ninth Annual Literacy Conference*

Name _____

School _____ Grade Level or Assignment _____

E-mail address _____

Phone (school) _____ (home) _____

EERC Member Non Member Full-time Student* Taking for credit**

*If full-time student, please have faculty member sign here: _____

****PLEASE NOTE: Credit paid for at a later date with a separate check to U of O**

Choice for Session A _____

Choice for Session B _____

Choice for Session C _____

*Mail registration form to Karen Antikajian, PO Box 259, Cheshire, OR 97419
(Postmarked by October 3, 2008 or add a \$5 late fee)
Please enclose a check for the correct amount payable to EERC.*

October Inservice-Day Literacy Conference

*Register early Save \$\$ Get the sessions you want
\$5 fee for late or on-site registration*