



KATS KAMP 2012 Pre-Registration

Please Print Clearly

One Form Per Person
PLEASE

KATS KAMP 2012 April 20 – 22 Rock Springs Ranch, Junction City, KS

Part 1: Contact/School/Organization Information

Name (First, MI, Last) _____

Mailing Address _____ City _____ State _____ Zip _____

Home/Cell Ph # _____ Work # _____ Fax # _____

Email Address _____

Gender (We need to know for Housing assignments) Male _____ Female _____

School Information

County where you work (Abbr) _____ School District/Org Name & Dist # _____

(Check all that apply)

Title: Teacher _____ Retired _____ Student _____ Administrator _____ Business _____ Non-Profit _____ Non-Teaching _____ Other _____

Grade Level: Prim K-2 _____ Int 3-5 _____ Mid/Jr 6-8 _____ Sec 9-12 _____ College _____

Subject Areas: All Subjects _____ Bio/Life Science _____ Chem _____ Earth/Space _____ Gen Sci _____ Lang Arts _____

Math _____ Phys Sci _____ Soc Studies _____ Spec Ed _____ Tech/Computers _____ Other (specify) _____

Part 2: Conference Options (Please choose which package you Prefer)

Mark ALL days you will be at Rock Springs

_____ FRI _____ SAT _____ SUN

Registration Only:

\$160 (all conference or Saturday only)

\$80 (Friday or Sunday WALK IN)

_____ Package A (Registration + Room + Board)

_____ Package B (Registration + choices below)

TOTAL: \$270 Regular or \$250 Student

Meals: \$10.00 each (buffet)

Fri Sup _____ Sat Brk _____ Sat Lun _____ Sat Sup _____

Sun Brk _____ Sun Lun _____

Number of Meals _____ x \$10.00 = _____

Normal Rate

2 nights lodging = \$60, Fee - \$160 (\$140 for students), 6 meals = \$60

YOU SAVE \$10

Onsite Housing: Mark ALL nights you will be staying at Rock Springs

Friday _____ Saturday _____

Heated _____ (\$30/night) \$ _____

Semi-Heated _____ (\$30/night) \$ _____

Tent/RV _____ (\$5/night) \$ _____

Please add housing/meals/conference fees:

AMOUNT: \$ _____

REGISTRATION: \$ 160.00

GRAND TOTAL: \$ _____

Are you a: Presenter _____ Exhibitor? _____

Part 3: Payment Method

(Please send with registration form)

Make checks out to KATS KAMP 2012

_____ Personal Check _____ School Check _____ Group CK

_____ School PO _____ Scholarship Recipient
(please specify sponsor)

MAIL TO: Carol Hewitt, Box 323
Meade, KS 67864