

**Developing Mathematical Habits of Mind
CME Project Implementation Workshops**

July 27-31, 2009

REGISTRATION FORM



To submit registration by mail or fax, print this form and send a completed registration with check, money order, or purchase order (PO) to the address below.

CME Project Workshops
Attn: Melody Hachey
Education Development Center, Inc.
55 Chapel Street
Newton, MA 02458
Fax: 617-969-1527

To submit registration by email, save the PDF onto your computer, complete the form, then submit it either by clicking below or by attaching it to an email to Melody Hachey at EDC, mhachey@edc.org

Registration Information

Name

Title

Grade Level

Institution/School Name

School District

Home Address

City

State

Zip

Work Phone

Home Phone

Preferred Email

Check or click here if you'd like to receive the *CME Project* e-newsletter:

1. Did you use *CME Project* during the 2008-2009 school year? If not, are you planning to use it?

2. What do you hope to learn by attending this workshop?

3. How did you hear about this workshop?

Tuition Fees and Other Options

Tuition: The tuition fee is \$600 per person, which includes daily lunch and a binder of course materials. Select one of the following concurrent sessions:

Developing Algebraic Habits of Mind

Developing Mathematical Habits of Mind

Travel and Lodging: Participants are responsible for their own transportation and lodging. To request information about accommodations, check the box below.

Request information about Lodging

Graduate Credit: Graduate credit is available at an additional cost. Participants must complete an application and meet course requirements. Check the box if you'd like to receive more information and an application.

Request information about Graduate Credit

Payment Information

- **Pay by Check or Money Order:** Make check or money order payable to Education Development Center, Inc.
- **Pay by Purchase Order:** Provide a purchase order (PO) number, complete billing address and contact information (below) if another party, such as your school or school district, is paying in full or in part for this workshop.
- **Pay by Credit Card:** Please contact Melody Hachey at EDC, 617-618-2510.

PO#

Institution

Billing Contact

Billing Title

Billing Address

Billing City

State

Zip

Billing Contact Phone

Billing Contact Fax

You will be sent a confirmation email once your registration is received. Workshops are filled on first-come, first-served basis. Limited space is available.

Cancellation Policy

If you must cancel, a substitute participant is always welcome. Otherwise, \$300 of the tuition is nonrefundable; all additional payments are fully refundable up to May 15, 2009, nonrefundable thereafter.