

REGISTRATION FORM

Register at www.ascd.org/leadershipsummit



YES! I want to attend the 2022 Leadership Summit:
The Adaptive Leader.

ASCD Leadership Summit

The Adaptive Leader

October 21–23, 2022

ONLY ONE REGISTRANT PER FORM. PLEASE TYPE OR PRINT CLEARLY. INCOMPLETE FORMS WILL BE RETURNED.

PLEASE TYPE OR PRINT FOR NAME BADGE

NAME:*	<input type="radio"/> MR <input type="radio"/> MRS <input type="radio"/> MS <input type="radio"/> DR.	<input type="radio"/> ASCD MEMBER/CUSTOMER ID (IF KNOWN)	
JOB TITLE*	SCHOOL/DISTRICT/COMPANY*		
ADDRESS*	<input type="radio"/> HOME <input type="radio"/> WORK		
CITY*	STATE/PROVINCE	ZIP/POSTALCODE*	COUNTRY
PHONE*	<input type="radio"/> HOME <input type="radio"/> WORK		
FAX	EMAIL*		

By registering, you acknowledge that you have read and agree to the conference registration policies posted at www.ascd.org/eventterms, and authorize ASCD to share your contact information with its affiliates, sponsors, and partners. To opt out of sharing your contact information, or if you have questions regarding the policies, please contact optout@ascd.org.

STEP 1: CONFERENCE OPTIONS

Category	
<input type="radio"/> Registration	\$595 (through Oct 20, \$695 onsite)
<input type="radio"/> Student	\$295
<input type="radio"/> Retiree	\$295
<input type="radio"/> Action Planning (Thursday, October 20)	\$199

Buy 4 Get One Free.

NOTE: Team registration is available. Refer to the second and third pages of this document.

STEP 3: PAYMENT OPTIONS

- Credit Card** ASCD accepts MasterCard, VISA, American Express, or Discover Card. Credit card orders are not accepted via email.
 - Register online at www.ascd.org/leadershipsummit.
 - Call 1-800-933ASCD (2723) OR 1-703-578-9600. Please have your credit card number ready. ¡Se habla Español!
 - Mail to ASCD Conference Registration, P.O. Box 826887, Philadelphia, PA 19182-6887 USA
 - Fax to 1-703-575-5414
- Purchase Order**
 - All purchase orders must be paid in full within 30 days of the invoice date. Credit cards, checks, and wire transfers only.
 - Fax to 1-703-575-5414 · Email to registration@ascd.org.
- Check.** Mail to ASCD Conference Registration, P.O. Box 826887, Philadelphia, PA 19182-6887 USA
- Wire Transfer.** Email registration@ascd.org for transfer procedures.
- ASCD Gift Certificates/PD Voucher.** Email registration@ascd.org or mail ASCD Conference Registration, P.O. Box 826887, Philadelphia, PA 19182-6887 USA

If you are registering more than one person, please fax your registration forms to 1-703-575-5414.

CHARGE MY: MasterCard VISA AMEX DISCOVER

ACCOUNT NO: _____

EXPIRATION (MM/YY) _____ CVS # _____

SIGNATURE: _____

NAME ON CREDIT CARD (PLEASE PRINT): _____

BILLING ADDRESS: _____

STEP 2: CONFERENCE OPTIONS

CONFERENCE FEE	\$ _____
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ACTION PLANNING	\$ _____
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TOTAL PAYMENT : \$ _____

Team Registration. Please fax your group registration forms to 1-703-575-5414





ASCD Conferences

TEAM REGISTRATION COVERSHEET

Team Discount: Buy 4, Get One Free

General instructions: ASCD offers discounts to teams who register for conference events throughout the year, including Annual Conference and Leadership Summit. **When five team or group members register at the same time for the same event (Annual Conference, Leadership Summit), the fifth registration is FREE.**

This form must be completed by the individual submitting information and payment on behalf of all registrants (the Submitter). **Please have Submitter complete the information below and fax this form, along with purchase order and individual attendee forms, to 1-703-575-5414.**

STEP 1: SUBMITTER INFORMATION. Please print or type. Check below if Submitter plans to attend.

NAME* MR. MRS. MS. DR. ASCD MEMBERSHIP/CUSTOMER ID (IF KNOWN)

JOB TITLE* SCHOOL/DISTRICT/COMPANY*

ADDRESS* HOME WORK

CITY* STATE/PROVINCE* ZIP/POSTAL CODE* COUNTRY

PHONE* HOME WORK MOBILE

FAX EMAIL*

- I will attend with my team. Count me in!**
- Annual Conference
- Leadership Summit

*REQUIRED

STEP 2: SCHOOL, DISTRICT, INSTITUTION, or COMPANY RESPONSIBLE FOR PAYMENT

SCHOOL /DISTRICT/COMPANY*

ADDRESS*

CITY* STATE/PROVINCE* ZIP/POSTAL CODE* COUNTRY

Teams of five receive a FREE registration



STEP 3: SESSIONS SUMMARY of INDIVIDUAL REGISTRATION FORMS ATTACHED

List Attendees by Last Name	Attendee Email Address (email addresses must be unique to each registrant)	Payment Due from Individual Registrations	Total	
1.				<p>Send all forms (purchase orders/credit card information, and this team cover sheet) by fax to 1-703-575-5414, or scan and send via email to registration@ascd.org.</p>
2.				
3.				
4.				
5.		FREE!		

STEP 4: PAYMENT OPTIONS (Credit Card, Purchase Order, Wire Transfer, Check, or PD Vouchers/Certificates)

Review instructions for each form of payment on the back of this form. Call Customer Service if you have questions: 1-800-933-ASCD (2723).

If paying by Purchase Order, enter PO# and date below. Include PO in your FAX.
 PO# _____ Date _____

CHARGE MY: MasterCard. VISA. AMEX. DISCOVER

ACCOUNT NUMBER _____

EXPIRATION (MM/YY) _____ CSV # _____

SIGNATURE _____

NAME ON CREDIT CARD (PLEASE PRINT): _____

BILLING ADDRESS _____

ASCD Conferences: Team Registration Coversheet

How to Use This Form

Use this form in place of a generic facsimile (FAX) cover sheet when submitting team registrations for Annual Conference and Leadership Summit.

Check off the appropriate conference box in Step 1.

ASCD offers a special discount for teams of five individuals. When all five register together for the same conference, Pre-Conference Institute, or both (submitted with one coversheet and payment), one team member attends FREE.

Complete Each Section of the Coversheet

Step 1 identifies the person who is submitting registrations and payment, referred to as the Submitter. If the Submitter is also registering to attend, check the box in Step 1.

Step 2 identifies the organization who will pay for the group's registration costs for the main conference and adjunct events, such as pre- or post-conference institutes or luncheons.

Step 3 lists the persons who will attend by last name in rows A through E. Using the individual registration forms collected for each person who is attending, insert the Total Payment for each, and check if this includes a Pre-Conference Institute + Materials Fee, Keynote Luncheon, or Post-Conference fee. Re-enter the total for each individual attending in the Subtotal column. Add these to find the Team Registration total due and enter the total.

Step 4 identifies the payment method for the team registrations.

If using a Purchase Order, enter the purchase order (PO) number and effective date. Please fax a copy of the PO with your completed coversheet and individual registration forms to ASCD at 1-703-575-5414 if paying by this method.

If you prefer to submit your team registration materials electronically, you can print the required forms and purchase order, and then scan them so that the digital version can be attached to an email. Please send email submissions to **registration@ascd.org**.

If paying by Credit Card, enter the information requested at bottom of Side 1. Refer to the Payment Options chart for credit cards accepted for payment. Complete credit card payment by fax or phone as shown below. **Do not email.**

Summary of Payment Options

- Credit Card. ASCD accepts MasterCard, VISA, AMEX, or Discover Card. Credit card orders are not accepted via email
 - Call 1-800-933-ASCD (2723) or 1-703-578-9600. Please have your credit card number ready. Se habla Español!
 - Mail to ASCD Conference Registration, P.O. Box 826887, Philadelphia, PA 19182-6887 USA
 - Fax to 1-703-575-5414
- Purchase Order
 - All purchase orders for pre-conference and conference registrations, luncheons, and other sessions must be paid in full within 30 days of invoice date. No purchase orders accepted on-site. Cash, checks, and credit cards only.
 - Fax to 1-703-575-5414.
 - Email registration@ascd.org.
- Check. Mail to ASCD Conference Registration, P.O. Box 826887, Philadelphia, PA 19182-6887 USA
- Wire Transfer. Email registration@ascd.org for transfer procedures
- ASCD Gift Certificates/PD Vouchers. Mail to ASCD Conference Registration, P.O. Box 826887, Philadelphia, PA 19182-6887 USA