

Registration

Michigan District Early Childhood Conference
Thursday, August 14, 2008
Concordia University, Ann Arbor

Name: _____

Email: _____

School: _____

City: _____

Role (circle): Director, Teacher, Aide, Other _____

Sectional One (First Choice): _____

Sectional One (Second Choice): _____

Sectional Two (First Choice): _____

Sectional Two (Second Choice): _____

I will be participating in the Learning Fair (circle): YES NO

My presentation will be on (give brief description or title):

I would like to receive CEUs for this conference (circle) YES NO

I would like to receive SB-CEUs for this conference (for renewal of the Professional Teaching Certificate only; \$5 cost): YES NO

Submit registration and a check payable to the Michigan District for \$25 no later than August 4, 2008 to:

Michigan District - LCMS
Attn: Early Childhood Conference
3773 Geddes Road
Ann Arbor, MI 48105