



# REGISTRATION

## CULTURE MATTERS

### INDIVIDUAL REGISTRATION FORM

EARLY BIRD POSTMARK  
DEADLINE:

OCTOBER 29, 2008  
(Save \$45!)

*Conference fee includes Friday lunch and reception; Saturday continental breakfast and breaks, and all programming and session materials. Separate registration required for preconference workshops and Faculty Developers' Breakfast Session.*

*Registration is complete on receipt of full payment; sorry, we cannot accept email registrations, purchase orders, or split registrations. Fax registrations accepted for credit card registrations only. Refer to page 6 for refund policies.*

*To register for the conference, please return this form with your check or money order **payable to The Collaboration** or with your credit card information.*

Note:  
*\*Other Affiliate Members are institutions outside the five-state region of Iowa, Minnesota, North Dakota, South Dakota, and Wisconsin that are not HBCUs, tribal colleges, or Hispanic-Serving Institutions.*

*\*\*The group discount applies to full conference faculty or staff registrations from member institutions only. To receive the discount, all registrations must be submitted together by the faculty development coordinator, along with the cover sheet listing all participants and full payment.*

Send to:  
Collaboration Conference  
2356 University Ave. W., Ste. 230  
St. Paul, MN 55114  
Fax: (651) 646-3162

For more information, contact The Collaboration at (651) 646-6166, or e-mail us at [collab@collab.org](mailto:collab@collab.org)

NAME (Dr./Mr./Ms.) \_\_\_\_\_ BADGE NAME \_\_\_\_\_

TITLE \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

INSTITUTION \_\_\_\_\_

STREET \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

DAYTIME TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

DISCIPLINARY AREA (check)     Humanities     STEM     Arts     Social Sciences  
    Education     Health Sciences     Other

PLEASE NOTE ANY SPECIAL PHYSICAL OR DIETARY REQUIREMENTS \_\_\_\_\_

PLEASE SIGN HERE IF WE MAY USE YOUR IMAGE IN MARKETING OR PROMOTIONAL MATERIALS

### To help with planning, check to indicate your preference for concurrent sessions (titles on page 4):

SESSION I: (choose one)    SESSION II: (choose one)    SESSION III: (choose one)    SESSION IV: (choose one)  
 A  B  C  D     A  B  C  D     A  B  C  D     A  B  C  D  
 E  F  G  H     E  F  G  H     E  F  G     E  F  G  H

## CONFERENCE REGISTRATION FEES

(see pages 4-5 for member institutions)

	REGIONAL, ASSOCIATE, & HBCU, TRIBAL COLLEGE, AND HSI AFFILIATE MEMBER	OTHER AFFILIATE MEMBER*	NONMEMBER
<b>FULL CONFERENCE REGISTRATION</b>			
Faculty or Staff	<input type="checkbox"/> \$265	<input type="checkbox"/> \$275	<input type="checkbox"/> \$360
Graduate or Undergraduate Student	<input type="checkbox"/> \$135	<input type="checkbox"/> \$145	<input type="checkbox"/> \$195
Undergraduate Student Presenter	<input type="checkbox"/> Free	<input type="checkbox"/> Free	<input type="checkbox"/> \$195

<b>ONE-DAY REGISTRATION</b>			
<input type="checkbox"/> Friday Only <input type="checkbox"/> Saturday Only	<input type="checkbox"/> \$215	<input type="checkbox"/> \$225	<input type="checkbox"/> \$300

<b>PRECONFERENCE REGISTRATION</b> (includes continental breakfast)	<input type="checkbox"/> \$75	<input type="checkbox"/> \$75	<input type="checkbox"/> \$95
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Please check which preconference session you plan to attend.

- [A] Beliefs and Behaviors that Help and Hinder Intercultural Relations
- [B] Cultural Competencies for Educators
- [C] Welcoming, Restoring, Dwelling, and Sending: Practicing Hospitality on Campus
- [D] What Do I Do Now? Managing Diversity Flashpoints in Higher Education
- [E] Writing Grant Proposals

<b>FACULTY DEVELOPERS' BREAKFAST SESSION REGISTRATION</b>	<input type="checkbox"/> Free	<input type="checkbox"/> Free	<input type="checkbox"/> \$35
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<b>GROUP DISCOUNTS</b> (full conference, member faculty/staff only)**			
-six to 10 people	<input type="checkbox"/> -\$15	<input type="checkbox"/> -\$15	<input type="checkbox"/> N/A
-more than 10 people	<input type="checkbox"/> -\$25	<input type="checkbox"/> -\$25	<input type="checkbox"/> N/A

SUBTOTAL: \_\_\_\_\_

If postmarked after October 29, 2008, add \$45     \$45     \$45     \$45

**TOTAL PAYMENT ENCLOSED:** \_\_\_\_\_

CHECK ENCLOSED     CREDIT CARD PAYMENT     AMEX     VISA     MASTERCARD

CREDIT CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

CSV# \_\_\_\_\_ (the three digits at the end of the signature panel on the back of your credit card)

CARDHOLDER NAME \_\_\_\_\_

CARDHOLDER BILLING ADDRESS \_\_\_\_\_

CARDHOLDER SIGNATURE \_\_\_\_\_

For Office Use Only

PD \_\_\_\_\_ AMT \_\_\_\_\_

C# \_\_\_\_\_ DD \_\_\_\_\_