



**2017 REGISTRATION FORM**

PLEASE PRINT OR TYPE CLEARLY

**FLORIDA ASSOCIATION  
FOR THEATRE EDUCATION**  
*Conference 2017  
October 12th - 14th*

**IF ANY OF THE BELOW  
INFORMATION IS NEW  
OR CHANGED ONLY,  
PLEASE CHECK THE BOX.**

First FATE Conference? YES NO Who recommended you attend? \_\_\_\_\_

Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ County \_\_\_\_\_  
School/Company \_\_\_\_\_ Work Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_ Principal/Dean \_\_\_\_\_

**FEES INCLUDE THURSDAY WELCOME RECEPTION, ALL WORKSHOPS, MEETINGS, TWO CONTINENTAL  
BREAKFASTS, LUNCH ON SATURDAY, AS WELL AS SATURDAY NIGHT DINNER/ DANCE:**

**MEMBERSHIP FEES**

\_\_\_\_ Individual @ \$50.00 \_\_\_\_\_  
\_\_\_\_ Family Membership\* at \$75.00 (2 members) \_\_\_\_\_  
\_\_\_\_ College Student @ \$20.00 \_\_\_\_\_  
\_\_\_\_ Retired Membership @ \$25.00 \_\_\_\_\_  
\_\_\_\_ Organizational membership @ \$130.00 (3 members) \*Attach additional names\* \_\_\_\_\_  
\_\_\_\_ MEMBER--CONFERENCE REGISTRATION @ \$210.00 \_\_\_\_\_  
\_\_\_\_ NON-MEMBER CONFERENCE REGISTRATION @ \$250.00 \_\_\_\_\_  
\_\_\_\_ MEMBER One Day registration Friday Saturday @ \$100.00 \_\_\_\_\_  
\_\_\_\_ NON - MEMBER One day registration Friday Saturday @ \$160.00 \_\_\_\_\_

OPTIONAL ACTIVITIES AND ADDITIONAL FEES - These are NOT INCLUDED in registration fees.

\_\_\_\_ Number attending Friday luncheon with guest speaker @ \$30.00 each \_\_\_\_\_  
\_\_\_\_ Number of guest(s) I am bringing to the dinner Saturday night @ \$40.00 \_\_\_\_\_  
\_\_\_\_ Please check here if you are planning to arrive Thursday evening and attend the cocktail party \_\_\_\_\_  
\_\_\_\_ Please check here if you will be attending the Saturday dinner dance (included in registration) \_\_\_\_\_

\_\_\_\_ **Please check if you wish vegetarian meals**  
\_\_\_\_ **Total amount enclosed - Checks payable to FATE** \_\_\_\_\_  
\_\_\_\_ OR, check the box if you wish to PAY ON PAY PAL - send form to address below

**BE SURE YOUR BOOKKEEPER INCLUDES YOUR NAME WITH THE PAYPAL PAYMENT!!  
FATE Federal ID #59-1990642**

PO's are NOT accepted. No refunds including "Acts of God". \$25 charge for returned checks.

**Make checks payable to FATE.** Return completed form and payment to:  
**Murray Mintz - Executive Director - 2553 Forest Parkway S., Largo, FL 33771**