

# NYSAMS 2018 Registration Form

New York State Association of Mathematics Leaders & Supervisors

Educators' Hall of Fame Dinner and Leadership Summit

**Registration Deadline is October 17, 2018 for the Hall of Fame and Leadership Summit**

## 1 Contact Information

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_

School District, University, or other Affiliation:  
\_\_\_\_\_

Email \_\_\_\_\_

Please check organizations to which you belong

\_\_\_AMTNYS \_\_\_NCTM \_\_\_NCSM

## 2 NYSAMS Membership Fee (Not required for HOF)

Membership Fee (valid for one year) \$25 \_\_\_\_\_

New Member (valid for two years) \$35 \_\_\_\_\_

Retirees \$20 \_\_\_\_\_

## 3 NYSAMS Mathematics Educators Hall of Fame

Thursday, November 1, 2018

6:30 PM to 9:30 PM, Saratoga Springs, NY

*(Includes cocktail hour, dinner, gift for Honorees)*

Hall of Fame Dinner Attendance Fee \$70 \_\_\_\_\_

For seating purposes, please indicate the name of person you are honoring  
\_\_\_\_\_

## 4 NYSAMS Annual Leadership Summit

*(Continental Breakfast and Lunch included)*

Thursday, November 1, 2018

9:30 AM to 2:00 PM, Siena College (near

Saratoga)

Summit Pre Registration Fee \$25 \_\_\_\_\_

If you would like a CTLE certificate, please provide

Date of birth \_\_\_\_\_

Last four digits of your social security number \_\_\_\_\_

## 5 Ad for the Full Color 8½" x 11" Program

*(Distributed at all events!)*

Email a photo ready copy of your ad by **September 30, 2018**

to:

[heidibromley@gmail.com](mailto:heidibromley@gmail.com) and/or  
[heidi.bromley@questar.org](mailto:heidi.bromley@questar.org) and send a copy to  
[suzanne.libfeld@gmail.com](mailto:suzanne.libfeld@gmail.com)

Full Page \$150 \_\_\_\_\_

Half Page \$80 \_\_\_\_\_

Quarter Page \$50 \_\_\_\_\_

Eighth Page (business card) \$30 \_\_\_\_\_

Organization \_\_\_\_\_

## 6 Subtotals and Payments

Membership Fee (Section 2) \_\_\_\_\_

Hall of Fame (Section 3) \_\_\_\_\_

Leadership Summit (Section 4) \_\_\_\_\_

Journal Ad (Section 5) \_\_\_\_\_

**Total Payment** \_\_\_\_\_

## 7 Make checks payable to: NYSAMS Treasurer

Please mail this form with your check by  
**October 17, 2018** to:

Suzanne Libfeld  
2843 Old Yorktown Rd  
Yorktown Heights, NY 10598

Email: [suzanne.libfeld@gmail.com](mailto:suzanne.libfeld@gmail.com)