2019 SIMposium Registration

Doubletree Hotel • 200 McDonald Dr. • Lawrence, Kansas

July 16-18, 2019

MAILING ADDRESS (SELECT ONE): ❒ **HOME** ❒ **WORK**

Name: _____

Address: _____

_____ Phone ( )_____

We email **important conference information**. Please print clearly an **email address** that you check regularly:

_____

Alternate email: _____

Emergency contact name and phone number: _____

❒ **Certified SIM Professional Developer and Apprentice Registration Fee: $350** $ _____

For registrations postmarked after June 15, 2018, add $25 late fee. $ _____

❒ **Strateworks Renewal (optional): $50** $ _____

Total enclosed: $ _____

❒**Check** (made payable to KUCRL) _____

❒**Credit card** (Visa or MasterCard) # _____

Expiration date: _____3-digit security code (req.) _____

❒ Personal card OR ❒ Name of institution: _____

Billing address (req.): _____

Authorization signature: _____ Phone: _____

Email for paid credit-card receipt: _____

❒ **P.O. #** _____ Name of institution issuing P.O.: _____

Video Release: KUCRL will videotape this conference for use in future educational and publicity products. By attending, you consent to our use of any video in which you may appear.
Events and Materials: With your paid registration, you also receive professional development materials distributed during the conference, refreshments during breaks and admission to the social.

Cancellation Policy: If you cannot attend the conference, you must **notify KUCRL by July 1**, 2019 to receive a full refund of your registration fee, minus $50 processing fee. We will be unable to issue refunds after July 1, 2019.
Return Completed registration to:
KUCRL, Joseph R. Pearson Hall
1122 West Campus Rd., 7th Floor
Lawrence, KS 66045
Fax: 785.864.5728 **Email:** orderkucrl@ku.edu

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