



NEW YORK STATE MATHEMATICS ASSOCIATION OF TWO-YEAR COLLEGES

NYSMATYC Annual Conference • April 12 - 14, 2019
Radisson Hotel • 125 Denison Parkway East, Corning, NY 14830

EARLY REGISTRATION BY March 22, 2019
REGISTRATION CLOSES ON April 5, 2019
Reserve Hotel by March 15, 2019 (see hotel form)

CONFERENCE REGISTRATION FORM

(Registrations submitted after April 5th must be done on-site)
All registration receipts will be available at the registration desk.

Name: _____

I am already a NYSMATYC member for the 2019 calendar year.

I am not a NYSMATYC member for the 2019 calendar year and would like to join or renew my membership.

- \$20 Regular Member (voting)
\$20 Associate Member (non-voting)
\$15 Adjunct Member (non-voting)
\$15 Retired Member (non-voting)

I do not want to join NYSMATYC for the 2019 calendar year.

Personal Information: (please type)

College or affiliation _____ E-mail _____

Address _____

Name for name tag: _____ Name of guest(s): _____

Registration Information: (early registration fees must be received by March 22nd, 2019)

Check all that apply: Staying at the Hotel, Commuting, Presenter, Presider
(For meals, commuters please fill out the A La Carte section of the Hotel Registration Form. Note special dietary needs there.)

Please indicate which meal you selected on the Hotel Reservation Form for the Saturday Dinner:

- Grilled Salmon, Stuffed Chicken Breast, Artichoke & Pepper Turnover

NYSMATYC MEMBER

Membership Renewal Fee (\$20 Regular/Associate, \$15 Adjunct/Retired) \$ _____

Conference Registration Fee NYSMATYC members (\$45 by March 22, \$55 by April 5) \$ _____

NON-NYSMATYC MEMBER

Conference Registration Fee non-members (\$65 by March 22, \$75 by April 5) \$ _____

Student Registration Fee (\$15) \$ _____

WALK-IN

After April 5th, the Registration Fee for Members is \$60 and for Non-members is \$80 \$ _____

COMMUTER BREAKS AND MEALS: Commuters must fill out the A La Carte section of the Hotel Reservation Form to order meals and pay the hotel directly. \$ xxxxxxxxxxxx

Make checks payable to NYSMATYC. Send this completed form with check to: TOTAL: \$ _____

Joshua Hammond, NYSMATYC, Jefferson Community College, 1220 Coffeen St, Watertown, NY 13601

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