

Example

## 2009 AVID Summer Institute Registration Worksheet and Payment Coversheet

1. **Organize** the information needed for online registration on this worksheet
2. **Enter registrations** at [www.avidonline.org/si](http://www.avidonline.org/si)
3. **Send payment** with completed worksheet(s) to AVID Center

### District and Site Information

ABC School Dist.	DEF High School	(000) 111-2222	
<small>DISTRICT</small>	<small>SCHOOL</small>	<small>SCHOOL PHONE</small>	
1 Education Dr.	Sacramento	CA	99999
<small>SCHOOL ADDRESS</small>	<small>CITY</small>	<small>STATE</small>	<small>ZIP</small>

**\* Registrar** Please provide contact information for the person entering registrations online.

* Jane Doe	(000) 111-2222 x 3	jdoe@abc.org
<small>FIRST &amp; LAST NAME</small>	<small>PHONE</small>	<small>EMAIL</small>

**Attendees** List only those attending the same Institute. Use a separate form for each Institute.

Last Name	First Name	Email <small>The registration system requires a unique email address for each attendee.</small>	Job Title / AVID Role	Strand <small>Check strand availability at the Institute you're attending at <a href="http://www.avidonline.org/si">www.avidonline.org/si</a>.</small>
1 Doe	Jane	jdoe@abc.org	Counselor/Coord.	Prep for College
2 Smith	John	jsmith@abc.org	ELA/site Team	Critical Rdg. & Wtg. II
3 Jones	Joe	jjones@abc.org	Sci./site Team	Science II
4 Brown	Jack	jbrown@abc.org	ELA/Elect. Teacher <small>Title and role</small>	Critical Rdg. & Wtg. II
5 DEF High School	TBA 1	DEFHS.TBA1@abc.org	as appropriate	As appropriate for role
6				
7				
8				

**Summer Institute** Mark only one. Please use a separate worksheet for each Summer Institute.

- |                                     |                |   |            |
|-------------------------------------|----------------|---|------------|
| <input type="checkbox"/> Dallas 1   | June 22-26     | <input type="checkbox"/> Dallas 2               | July 27-31 |
| <input type="checkbox"/> Orlando    | June 28-July 2 | <input checked="" type="checkbox"/> San Diego 1 | July 27-31 |
| <input type="checkbox"/> Sacramento | July 13-17     | <input type="checkbox"/> San Diego 2            | August 3-7 |
| <input type="checkbox"/> Atlanta    | July 20-24     | <input type="checkbox"/> Chicago                | August 3-7 |

### Payment Method

- Purchase Order # \_\_\_\_\_ Fax purchase order and completed worksheet(s) to AVID Center, 800 524-9917.
- Check # \_\_\_\_\_ Mail check and completed worksheet(s) to: AVID Center-SI Payment 9246 Lightwave Ave, Ste 200, San Diego, CA 92123.
- Credit Card Select *Pay Now with Credit Card* online or call AVID Center to process the transaction, 858 380-4822.

Other Please specify sent payment cover sheet to Region 8 (select other-online)

**Cancellation Policy** Cancellations must be submitted in writing by completing the Contact Form online at [www.avidonline.org/sihelp](http://www.avidonline.org/sihelp). All cancellations must be received no fewer than 30 days before Event date. There will be a \$75.00 processing fee for all cancellations. Cancellations received fewer than 30 days before Event date are not eligible for a refund. Please refer to the full AVID Center Cancellation policy in the FAQ at [www.avidonline.org/si](http://www.avidonline.org/si).

**Contact for Payment** Whom may we contact with questions about payment? →

*Contact for your site registrations*		
<small>FIRST &amp; LAST NAME</small>	<small>PHONE</small>	<small>EMAIL</small>