MyScience: Connecting With 21st Century Students



2009 OSTA Fall Conference

Howell Hall, University of Central Oklahoma, Edmond, Oklahoma Saturday, November 7, 2009

PRE-REGISTRATION FORM (Due October 23, 2009)

	pply to you and write in the total				
	ncludes OSTA membership and lu				
	(with school ID) – includes memb				
Conference T-Shirt (optional) Ple	ease indicate T-Shirt size needed:	S M L XL 2XL	3XL \$15.00		
TOTAL (Please include totals from	n other side and enclose a check or Pu	urchase Order for this an	nount.)		
Please make check payable to OSTA or include school's P.O. number here OSTA, Peggy Alexander, Treasurer, 16253 E. 78 th St. N, Owasso, OK 74055 Primary Registration and Membership Form					
Home Address	City	State	ZIP		
School Name					
School Address	City	State	ZIP		
School Phone ()	E-mail				
Elem. Teacher MS/JH Teacher	AdministratorSr. High Te StudentHigher Ed.	eacherCurricul Other	lum Specialist		
	er three (3) additional Full Conference waiver of their registration fee. Thinl				
registrations on this form and y	you can attend the OSTA Fall Conferen	nce, plus enjoy lunch an	nd renew your 2010		

So round up three colleagues and fill up your car and save with the OSTA Carpool Special.

membership at no cost!

OSTA Carpool Special

Carpool Special Registration and Membership Form

Full Conference Registration – includes OSTA membership and lun- Pre-service Teacher Registration (with school ID) – includes member Conference T-Shirt (optional) Please indicate T-Shirt size needed: TOTAL for this registration	rship and lunch	\$35.00 \$20.00 \$15.00 (transfer to fi	ont)
Name			
Home Address	City	State	ZIP
School Name			
School Address	City	State	ZIP
School Phone ()	E-mail		
Elem. TeacherAdministratorStudent OSTA District: (please refer to front side of this	Higher Ed.	_Curriculum Specialis _ Other	t
Carpool Spec	ial Registration and Membership Form		
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Name			
Home Address	City	State	ZIP
School Name			
School Address	City	State	ZIP
School Phone ()	E-mail		
Elem. TeacherAdministratorStudent OSTA District: (please refer to front side of this	Position Sr. High Teacher Higher Ed.		t
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Name		G	7710
Home Address		State	ZIP
School Name			
School Address			
School Phone ()			
Elem. TeacherAdministratorStudent OSTA District: (please refer to front side of this	Position Sr. High Teacher Higher Ed.	_Curriculum Specialis _ Other	t