



# Math and Science Institute Workshop Registration



ARKANSAS TECH  
A CENTURY FORWARD

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**PRINT IT THIS FORM AND FILL IT OUT COMPLETELY.**

Mail it with your registration fee to the address at the end of the form.

**WORKSHOP NAME** \_\_\_\_\_

**Workshop Date** \_\_\_\_\_ **Registration Fee \$** \_\_\_\_\_

**Last Name** \_\_\_\_\_ **First Name** \_\_\_\_\_

**Last 5 digits of your Social Security number:** X X X - X \_\_\_\_ - \_\_\_\_

**Home Address** \_\_\_\_\_ **Home City** \_\_\_\_\_

**Home State** \_\_\_\_\_ **Home Zip** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**School email** \_\_\_\_\_

**If your school email is not available to you during the summer, please list an alternate email address if you have one:**

**Alternate email address** \_\_\_\_\_

**School** \_\_\_\_\_

**School Address** \_\_\_\_\_

**School City** \_\_\_\_\_ **School Zip** \_\_\_\_\_

**School Phone** \_\_\_\_\_ **School Fax** \_\_\_\_\_

**Grade Level** \_\_\_\_\_ **or** **Subject Area** \_\_\_\_\_

**Total Number of Students Taught Daily** \_\_\_\_\_



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Check here only if you need **SPECIAL ASSISTANCE** due to a disability. Please describe your needs below and include an evening phone number.

Please check to make sure all information is correct before mailing the form.

**ALL REGISTRATION DEADLINES ARE THREE (3) DAYS PRIOR TO THE REQUESTED WORKSHOP.** If you wish to register for multiple workshops, please submit a separate form for each workshop. Please make all checks or Purchase Orders payable to Arkansas Tech University and write the workshop name on the memo line.

Registrations fees can be refunded **ONLY** if a cancellation is received at the MSI more than **3 DAYS** prior to the workshop's scheduled date. Following the registration deadline for a scheduled workshop date, **REGISTRATION FEES ARE NON-REFUNDABLE UNLESS THE WORKSHOP IS CANCELLED!**

\*\*\*\*\***REMINDER**\*\*\*\*\*

**Space is limited in each workshop; get your registration in early! If you have any questions, contact:**

Math & Science Institute  
1507 N. Boulder Ave  
Russellville, AR 72801-2222  
479-964-0825  
Email: [MSI@atu.edu](mailto:MSI@atu.edu)

**You may fax this form to 479.964.0542. Mail your registration fee(s) to the address above. You are not officially registered until the registration fee is received.**