## 2018 AVID Summer Institute Payment Coversheet

- 1. **Register the attendees** at <u>my.avid.org</u>. Log in and click on the Event Registration tab on your homepage. If you don't have a MyAVID account, contact your District Director or email us at <u>sichange@avid.org</u>.
- 2. Send payment(s) with completed worksheet to AVID Center.

FIRST AND LAST NAME

DISTRICT		SCH	OOL	SCHOOL PHONE				
SCHOOL ADDRESS		CITY	,		ST	ATE		ZIP
Registrar: Please	provide cor	ntact	information f	or the perso	on ente	ering reg	gistratio	ns online.
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Attendees: List o * Please note: This covers								
Last Name	First Name		Email The registration system requires a unique email address for each attendee.		Job Title/ AVID Role		Strand Check strand availability at the Institute you're attending at my.avid.org.	
Summer Institute  ☐ Denver	June 12-14		Please use a Sacramento	Separate w June 27-29		et for ea	ach Sun	nmer Institute.  July 10-12
☐ San Diego 1(MV)	June 13-15	_	Anaheim	June 28-30		Philadelp	hia	July 18-20
□ Dallas	June 20-22		Orlando	July 9-11		Minneap		July 31-Aug 2
□ Tampa	June 20-22		San Antonio	July 10-12		San Dieg	2(DT)	August 1-3
Payment Method	(s):							
Purchase Order # *Copy of purchase of	<b>`</b>	pany th	Email copy of P	PO* and coversheet(  yment to be appli	(s) to at <u>avid</u> ied.	registration@a	avid.org or by	y fax to 800-524-9917.
☐ Check #	Mail check	and com	pleted coversheet(s) to	o: AVID Center-SI F	Payment, De	pt. 270, PO E	Box 509015, S	San Diego, CA 92150-901
☐ Credit Card Select	t <i>Pay Now with Credi</i>	t Card on	line or call (858) 380-4	800 and press 2 for	Events.			
☐ Other Please specify	•							

PHONE

**EMAIL** 

	Last Name	First Name	Email The registration system requires a unique email address for each attendee.	Job Title/ AVID Role	Strand Check strand availability at the Institute you're attending at myavid.org.
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Please send completed worksheet(s) with payment to AVID Center:
Email purchase orders to: <a href="mailto:avidregistration@avid.org">avidregistration@avid.org</a>.

Fax purchase orders to: 800-524-9917.

Mail checks to: AVID Center–SI Payment, Dept. 270, PO Box 509015, San Diego, CA 92150-9015.