

Registration Form
Spring 2010 Preservation Workshops

Mr. Ms. Other _____

Full Name (*First and Last – as you want it to appear on your badge*)

Job Title

Institution (*If none, please enter "NONE"*)

Address

Address (*Continued, if necessary*)

City

State

Zip Code

Work Phone (*If none, please enter "NONE"*)

Home or Cell Phone (*Optional but please circle type if listed*)

Attendee's E-mail (*Where your confirmation letter should be sent*)

Please check the workshop(s) you wish to attend.

| | Workshop Date | Registration Deadline |
|--|--------------------------|----------------------------------|
| <input type="checkbox"/> Preservation of Scrapbooks | 3/9 | 3/5 |
| <input type="checkbox"/> Basic Paper Repair | 3/10 | 3/5 |
| <input type="checkbox"/> Preservation of Oversize Materials | 3/11 | 3/5 |
| <input type="checkbox"/> Metadata Basics | 3/16 | 3/12 |
| <input type="checkbox"/> Disaster Planning with dPlan™ Lite (at Merrimack College Campus) | 3/17 | 3/12 |
| <input type="checkbox"/> Testing Your Disaster Plan | 3/18 | 3/12 |
| <input type="checkbox"/> Writing Successful Grant Proposals | 3/24 | 3/19 |

Registration Fee: \$150 per workshop; \$130 each for 2 or more workshops

MasterCard VISA American Express Check or Money Order Enclosed

Credit Card Number

Expiration Date (MM/YY)

Name exactly as it appears on the credit card

I authorize the Northeast Document Conservation Center to charge \$ _____
to the credit card number listed above.

3/9/10-3/24/10