

SCAIR 2014 REGISTRATION FORM
2014 SCAIR Joint Conference
March 3-5, 2014
The Westin Poinsett
Greenville, South Carolina

Name:	Badge Name:
Title:	Institution:
Address:	City, State, Zip
Telephone:	Email:
Is this your first conference (Y or N)?	
Year of the first SCAIR conference you attended:	
I would be willing to serve as a facilitator (Y or N)?	

Fees	Amount Due	Amount Enclosed
SCAIR Registration Fee <i>Includes SCAIR membership</i>	\$150.00	

Checks are payable to SCAIR (Tax ID 56-1562055). Send conference registration form and fee to: Mary Beth Schwartz, SCAIR Treasurer, Office of Institutional Effectiveness & Research, York Technical College, 452 S. Anderson Road, Rock Hill, SC 29730.

Refund Policy:

If refund is requested Thirty days (30) days prior to 1st day of Conference, refunded amount is registration fee minus membership fee.

If refund is requested 14 -29 days prior to 1st day of Conference, refunded amount is ½ half of registration fee.

If refund is requested less than 14 days prior to 1st day of Conference, no money will be refunded.

Extraordinary circumstances outside of the above parameters will be reviewed by the Executive Board.

If you have any questions, please contact Mary Beth Schwartz, Treasurer, at mbschwartz@yorktech.edu (803.327.8042) or Donald Miles, Program Chair, at DMILES@mailbox.sc.edu.