

**CRÈME International Conference:
Race, Erasure, and Equity in Music Education**

Enrollment Form

Program #3798-11

Name _____

Address _____
Street

City _____ State _____ Zip _____

Phone (____) _____ E-mail _____
Area code Phone number

Information will be used to contact you about your registration and information about future similar programs.

Check this box if you do **NOT** consent to sharing your contact information on a participant roster made available to Conference participants.

Enrollment Fee:

(Note: A non-refundable \$40 deposit will secure registration; the remainder is due on arrival.)

Conference Registration (\$125)..... \$ _____
(or _____ days at \$55 per day)

College Student Enrollment (\$75)..... \$ _____
(or _____ days at \$35 per day)
(please enclose proof of full-time status)

Dinner on Oct. 22 at the University Club (optional) (\$35)..... \$ _____

TOTAL AMOUNT DUE \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

Enclosed check/money order, payable to UW-Madison in US dollars

Please charge to the following account:

MasterCard VISA American Express

Card No. _____ Expires _____

Cardholder's Name _____

Signature _____

Mail to: CRÈME Conference
c/o Jodi Roberts
UW-Madison Continuing Studies
21 N. Park Street, 7th Floor
Madison, WI 53715

Fax to: 608-265-4555, Attn: Jodi Roberts (Faxed registrations must include payment by credit card or purchase order.)