



Southern Regional Faculty and Instructional Development Consortium
Membership Form & Sharing Conference Registration

Annual Institutional Dues: July 2006 – June 30, 2007

Please check the box next to the number of people in your institution for which you are paying dues. These dues entitle your institution to participate in the 2007 SRFIDC Annual Sharing Conference (March 11-13, 2007). Please make all checks payable to SRFIDC.

- 2 representatives = \$250.00
- 4 representatives = \$500.00

- 3 representatives = \$425.00
- Additional representatives = \$125.00 each

Annual Individual Dues: July 2006 – June 30, 2007..... \$175.00

Make Check Payable to SRFIDC • Due by February 9, 2007 • (TIN #51-0318435)

Institutional Information (Please TYPE or PRINT)

Institution Name: _____

Center/Program Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone/Fax Number: _____

Website: _____

Sharing Conference Registration Additional Information

Opening Luncheon (Sunday, March 11, 2007; 11:30 am - 1:00 pm):

This event is included in the registration fee for the conference. Location: To be announced. Please let us know if you plan to attend.

Night on the Town (Monday, March 12, 2007; 7:00 - 10:00 pm):

This event is NOT included in the registration fee for the conference; participants will pay for their own meal. This is a great opportunity to have additional conversations in a quiet and relaxed environment and to explore local cuisine.

number attending	
number	\$40.00 each

Membership Fees Total:	\$
Night on the Town Total:	\$
Late Registration Fees	\$
TOTAL ENCLOSED:	\$

NOTE: Conference registration does NOT include accommodations. Please be sure to make your own lodging reservations directly with the conference hotel as soon as it is announced

Make checks payable to SRFIDC. Print and send payment and registration form to:

Irene Kokkala
North Georgia College & State University
The Center of Teaching & Learning Excellence
159 Sunset Drive
Dahlonega, GA 30597

If you have questions, please call Irene at 706.864.1862 or e-mail her at ikokkala@ngcsu.edu



SRFIDC Institutional Information Survey

We use this information to build our member database directory of contacts and expertise areas so that we can share it with our members. It helps us all connect faculty developers with each other.

Institution Type: _____

Number of Students: _____ Number of Faculty: (full time): _____ (part time) _____

Program administratively organized in what area of the university: _____

Year program began: _____ Annual Operating Budget: \$ _____ (do not include salaries/benefits)

Number of Professional Staff: Full-time: _____ Part-time: _____ (include graduate assistants)

Number of Support Staff: Full-time: _____ Part-time: _____ (include work study students, etc.)

Programs/Services Offered:

Most Successful/Well-received Program:

Major or New Initiatives for current year:

Please complete this information for each institutional representative. Use additional sheets as needed.

<i>Name</i>	<i>Phone</i>	<i>E-mail:</i>	<i>Areas of Expertise</i>

Registration Deadline: February 9, 2007.

Please let us know you're coming!

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An additional \$50.00/person will be charged for onsite registration.