

# The Reading Institute, Inc.

## Diagnosis and Remediation of Learning Problems in Mathematics Registration Form

(each participant must complete a registration form)

**Registration Deadline: May 28, 2010**

**Name** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**School Name** \_\_\_\_\_ **School Email** \_\_\_\_\_

**School Phone** \_\_\_\_\_ **School Fax** \_\_\_\_\_

**School Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Grade/Special** \_\_\_\_\_

### Method of Payment:

**Payment is made to The Reading Institute. (\$800 without Graduate Credits / \$950 with Graduate Credits)**

Registration form **cannot** be processed without accompanying purchase order, check, money order or credit card number. Please include attendee and institute names on purchase order or check.

\_\_\_\_\_ **Purchase Order #** \_\_\_\_\_  
(must be faxed or attached to registration form)

\_\_\_\_\_ **Check/Money Order**  
(make check payable to The Reading Institute)

\_\_\_\_\_ **Credit Card**  
\_\_\_\_\_ Visa \_\_\_\_\_ Master Card \_\_\_\_\_ American Express

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Print Name \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

### Two easy ways to register:

#### 1. Fax to:

The Reading Institute  
413.458.8777

#### 2. Mail to:

The Reading Institute  
430 Main Street  
Williamstown, MA 01267

#### questions?

call 413.458.9995 or  
email [janet@thereadinginstitute.net](mailto:janet@thereadinginstitute.net)