

INTERNATIONAL HUMAN LEARNING RESOURCES NETWORK

Registration for **50th Annual Conference: October 27 – November 3, 2019** at the **The Dana on Mission Bay in San Diego, CA**. Mail this registration form by **July 15, 2019** – to get the \$100 Early Bird discount - with check or money order (in US dollars only) payable to IHLRN to:

**IHLRN Conference
c/o M.A. Bjarkman
4119 Inglewood Blvd.
Los Angeles, CA 90066**

Call M.A. at **317-850-5111** with questions. Please print legibly.

Name(s): _____ (BA, MS, PhD, etc.) _____

Address: _____

City: _____ State: _____ Zip code: _____

Country: _____

Phone: (h) _____ or (cell) _____ Email: _____

Please check as many of the following statements as apply to you:

- _____ My/our address is either new or corrected.
- _____ I have applied for a scholarship in the amount of \$ _____.
- _____ I/we am/are enclosing a check in the amount indicated below:

Before July 15 the rates below; After July 15. These rates apply:

	Standard	Upgrade	Standard	Upgrade
\$ _____ Single	\$1985	\$2458	\$2085	\$2558
\$ _____ Double pp	\$1397	\$1634	\$1497	\$1734
\$ _____ Dbl couple	\$2794	\$3268	\$2994	\$3468
\$ _____ Triple	\$1201	\$1359	\$1301	\$1459
\$ _____ Quad	\$1102	\$1221	\$1202	\$1321
\$ _____ Tips for hotel staff (\$10 per person per day suggested)				
\$ _____ Scholarship recipient partial payment				
\$ _____ Additional donation to IHLRN Scholarship Fund				
\$ _____ Total amount enclosed				

I wish to share a room with (name) _____

My/our special needs are: _____

I/We agree that IHLRN and/or its Board of Directors will not be held responsible for any claims or damages arising out of my/our attendance at this conference.

Signature(s) _____ Date: _____

(NOTE: All attendees must sign.)