



Registration Form for individual teachers or school teams
Ohio's New Learning Standards for Mathematics Regional Workshop

Sponsored by the Ohio Council of Teachers of Mathematics

Workshop Location: Ohio University, Athens, Ohio

Workshop Date: Saturday September 7, 2013, 1-4 p.m.

School district represented: _____

Please provide the following information for each participant. (Use additional pages if needed.)

CCSS Levels of Awareness: (1) It's new to me (2) I have seen the document
 (3) I have attended a workshop (4) I have studied my grade band standards (5) I am working on implementation

Breakout Sessions: Choose one of these grade bands: K-2 3-5 6-8 9-12

Registration fees: \$10 for OCTM members; \$15 for non-members.

(OCTM Membership information is available at http://www.ohioctm.org/join_octm.htm)

Name	e-mail Address	Grade taught or other position	CCSS Level	Breakout Band	Registration Fee

Please designate a **Team Contact** (one of the participants listed above).

Total Fees \$ _____

Name _____ Phone Number _____

Please return this form with payment by check or school purchase order made out to "Ohio Council of Teachers of Mathematics"

To: Katie Hendrickson, Athens Middle School, 51-55 West State Street, Athens, OH 45701

If you have questions about the location or schedule, please contact the regional coordinator, Katie Hendrickson, at katieahendrickson@gmail.com.