

YOUTH COURT DIRECTORS' SYMPOSIUM

REGISTRATION FORM

Friday, November 8, 2019 at Stony Brook University - 9:00am – 2:00pm



Use this registration form if you are paying by check/purchase order ONLY

(If you are paying by credit card, please register/pay at www.anysycRSVPify.com)

Registration Deadline: Monday, October 7th / Payment Deadline October 15th

FEE:

2019 ANYSYC Members - (preferred*, general, advisory) \$ 15.00 per person

Non-Member: \$ 25.00 per person

Includes: Lunch & 3 Workshops/Materials & Optional Reception on Nov. 7th from 7-9pm

Please make checks payable to: *Association of NYS Youth Courts, Inc.*

Mail check with reg. form to: Violet Palombo, c/o ANYSYC, 312 Wolf Rd, Latham, NY 12110

PAYMENT MUST BE RECEIVED BY OCTOBER 15TH

HOTEL INFO:

Holiday Inn Express, 3131 Nesconset Highway, Centereach, 1-855-516-1090

Thursday night block rate: \$115.00 per night / group code: **AYC** (price valid until 10/7 only)

For membership/registration/payment questions, please contact Violet at palombov@colonie.org

**Preferred Members are also eligible for a travel stipend*

PLEASE COMPLETE INFORMATION ON NEXT PAGE

ATTENDEE # 1

Name: _____

Program Name: _____

Address: _____

Phone: _____ Email: _____

Indicate Lunch Choice: _____ Regular _____ Gluten Free _____ Vegan

Member Rate: _____ \$15.00 or Non-Member Rate _____ \$25.00

Planning to attend Thursday night reception: _____ Yes _____ No

ATTENDEE # 2

Name: _____

Program Name: _____

Address: _____

Phone: _____ Email: _____

Indicate Lunch Choice: _____ Regular _____ Gluten Free _____ Vegan

Member Rate: _____ \$15.00 or Non-Member Rate _____ \$25.00

Planning to attend Thursday night reception: _____ Yes _____ No

ATTENDEE # 3

Name: _____

Program Name: _____

Address: _____

Phone: _____ Email: _____

Indicate Lunch Choice: _____ Regular _____ Gluten Free _____ Vegan

Member Rate: _____ \$15.00 or Non-Member Rate _____ \$25.00

Planning to attend Thursday night reception: _____ Yes _____ No

TOTAL CHECK AMOUNT: \$ _____