

**REGISTRATION FORM
MALCS 2003
SAN ANTONIO, TEXAS
AUGUST 10-13
(PLEASE TYPE OR PRINT CLEARLY)**

NAME: _____ ADDRESS: _____

Street Address

TELEPHONE #s

Home: ____/____

City

State

Zip

Work: ____/____

e-mail (s) _____

Cellular: ____/____

***FEES:**

PRE-REGISTRATION

ON-SITE REGISTRATION

**MEMBER

\$30

\$40

NON-MEMBER

\$40

\$50

COMMUNITY/STUDENT

\$20

\$30

PROFESSIONAL

\$25

\$35

(Please circle amount to indicate category)

***A limited number of Registration Scholarships are available depending on the contributions received. If you are requesting a Scholarship, please fill out this form and attach a brief paragraph indicating need and telling the site committee why you are seeking a registration scholarship.**

****Membership form must be turned in to the MALCS Treasurer separately.**

SUMMARY:

Registration: \$ _____ (from above)

T-shirt: (\$15) \$ _____ circle size: xxl xl l m

(t-shirts are black with the conference art work.)

Donation for Scholarship Fund: \$ _____ (A limited number of scholarships are

available depending on the contributions received by members. If you would like to add to the fund, indicate the amount.)

TOTAL: \$ _____

Make checks or money orders payable to MALCS 2003

to Dr. Norma E. Cantu
University of Texas at San Antonio
6900 N Loop 1604 W
San Antonio, TX 78249