

OLA Annual Conference Registration Form

April 3-5, 2013, Ardmore Convention Center

Registration Deadline: Must be received by March 20, 2013; On-Site registration fees will be \$10.00 higher.

PRE-CONFERENCES—WEDNESDAY, APRIL 3

“Emotional Intelligence” (includes lunch) - 9 am—4 pm

Member—\$70 Nonmember—\$110 _____

“PEARL Project” (includes lunch) - 9 am—4 pm

Member—\$70 Nonmembers—\$110 _____

“Affordable Learning Solutions for Oklahoma Students” (includes lunch) - 9 am—4 pm

Member—\$70 Nonmember—\$110 _____

“Chickasaw Cultural Center”(includes transportation; individuals pay for lunch on site)-8:30 am—4:30 pm

Member—\$60 Nonmember—\$100 _____

**CONFERENCE REGISTRATION—THURSDAY/FRIDAY, April 4/April 5 (Choose One)
(Fees include Thursday and Friday continental breakfasts, luncheons and
Thursday All Conference Event)**

OLA Member	Full Conference	\$180	_____
New OLA Member (joined since 7-1-12)	Full Conference	\$160	_____
Trustees (FOLIO)	Full Conference	\$135	_____
FOLIO	Meeting/Friday Lunch Only	\$50	_____
Students	Full Conference	\$125	_____
Non-OLA Member	One Day	\$190	_____
	Full Conference	\$260	_____

BANQUET—WEDNESDAY EVENING, April 3 _____ tickets@ \$40 _____

SPECIAL EVENTS

Early Bird Dine-Around (Tuesday Evening) - I will join the Dine-Around: _____ Yes _____ No

Trolley Fee—\$10

Drive Yourself — \$0 (You must register here even if you’re driving yourself) _____

OLA Pubcrawl (Wednesday after Banquet) - Trolley Fee—\$10 _____

WinStar Casino Bus Trip — **This event has been canceled. If you wish to visit the
Casino you will need to make your own arrangements.**

TOTAL COST FOR REGISTRATION, MEALS AND BOOKS _____

NAME: _____ **1st Time Attendee** _____ **Returning Attendee** _____

INSTITUTION: _____

WORK ADDRESS (with zip code): _____

WORK PHONE: _____

CELL PHONE: _____ **E-MAIL:** _____

SPECIAL NEEDS: _____

IF PAYING ONLINE, GO TO: www.oklibs.org

Method of Payment

Personal Check _____ Institution Check _____

Make checks payable to Oklahoma Library Association

Visa _____ MasterCard _____

Charge Card #: _____

Expiration Date: _____

Purchase Order #: _____

MAIL FORM & PAYMENT TO:
Oklahoma Library Association
PO Box 6550, Edmond, OK 73083
Fax: 405-525-5103
Refund requests must be received by March 27
Refunds will be issued after the Conference