

STEM 2016 REGISTRATION FORM

PLEASE PRINT CLEARLY:

FIRST NAME	LAST NAME
POSITION / TITLE	
SCHOOL / COMPANY / ORGANISATION	
ADDRESS	
CITY / BOX #	PROV / STATE
COUNTRY	POSTAL / ZIP CODE
WORK / MOBILE PHONE	
EMAIL ADDRESS	
EMERGENCY CONTACT NAME	
EMERGENCY CONTACT NUMBER	
DIETARY RESTRICTIONS OR OTHER SPECIAL REQUIREMENTS	

ATTENDING IN YOUR CAPACITY AS:

- | | | |
|---|---|---|
| <input type="checkbox"/> Primary Student | <input type="checkbox"/> Primary Teacher | <input type="checkbox"/> Gov't Official |
| <input type="checkbox"/> High School Student | <input type="checkbox"/> High School Teacher | <input type="checkbox"/> Gov't Employee |
| <input type="checkbox"/> Univ / College Student | <input type="checkbox"/> Univ / College Prof / Instructor | <input type="checkbox"/> Medical Professional |
| <input type="checkbox"/> Scientist | <input type="checkbox"/> Engineer | <input type="checkbox"/> Mathematician |
| <input type="checkbox"/> Parent | <input type="checkbox"/> Member of the Community | <input type="checkbox"/> Other: |

GENDER:

- | | | |
|---------------------------------|-------------------------------|---|
| <input type="checkbox"/> Female | <input type="checkbox"/> Male | <input type="checkbox"/> Prefer Not to Answer |
|---------------------------------|-------------------------------|---|

AGE:

- | | | |
|-----------------------------------|--------------------------------|---|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 35-44 | <input type="checkbox"/> 65 and over |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> Prefer Not to Answer |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 55-64 | |

HOW DID YOU HEAR ABOUT STEM CARIB CONFERENCE 2016?

- | | | |
|---|---|---|
| <input type="checkbox"/> Attended in Past | <input type="checkbox"/> Invited to Speak | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> Received an Email | <input type="checkbox"/> Work For / Am a Sponsor / Host | <input type="checkbox"/> LinkedIn |
| <input type="checkbox"/> Heard RADIO Ad / Interview | <input type="checkbox"/> Through My School | <input type="checkbox"/> Twitter |
| <input type="checkbox"/> Saw ONLINE Ad / Interview | <input type="checkbox"/> Through a Friend / Colleague | <input type="checkbox"/> Google / Online Search |
| <input type="checkbox"/> Saw NEWSPAPER Ad / Article | <input type="checkbox"/> Saw TV Ad / Interview | <input type="checkbox"/> Other: |

REGISTRATION	EARLY-BIRD (By Sep 9)	REGULAR (After Sep 9)	TOTAL	
Purchase FULL Conference Pass:				
<i>Your FULL Conference Pass includes admission to: all sessions, welcome reception, refreshment breaks, lunches, and a conference kit. A shuttle will be provided for overseas delegates between the hotel and the conference venue each morning and evening.</i>				
<i>SENIORS (60+) & Public School Teachers: Please note that meals are NOT included with your complimentary registration, but may be purchased separately (below).</i>				
Regular Adult Reg	<input type="checkbox"/> CI \$125 (US \$153)	<input type="checkbox"/> CI \$150 (US \$183)	\$	
Student (with valid ID)	<input type="checkbox"/> CI \$85 (US \$104)	<input type="checkbox"/> CI \$100 (US \$122)	\$	
Senior (60+)	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	\$	
-- OR -- Purchase SINGLE-DAY Pass(es):				
<i>Please select the day(s) for which you would like to register. Each single-day pass includes admission to the following for that day: sessions, refreshment breaks, lunch (and one conference kit). Students must present valid Student ID to qualify for the discounted student rates.</i>				
<i>SENIORS (60+): Please note that meals are NOT included with your complimentary registration, but may be purchased separately (below).</i>				
TUESDAY Opening	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	\$	
WED	Adult	<input type="checkbox"/> CI \$50 (US \$61)	<input type="checkbox"/> CI \$50 (US \$61)	\$
	Student	<input type="checkbox"/> CI \$35 (US \$43)	<input type="checkbox"/> CI \$35 (US \$43)	\$
	Senior	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	\$
THU	Adult	<input type="checkbox"/> CI \$50 (US \$61)	<input type="checkbox"/> CI \$50 (US \$61)	\$
	Student	<input type="checkbox"/> CI \$35 (US \$43)	<input type="checkbox"/> CI \$35 (US \$43)	\$
	Senior	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	\$
FRI	Adult	<input type="checkbox"/> CI \$50 (US \$61)	<input type="checkbox"/> CI \$50 (US \$61)	\$
	Student	<input type="checkbox"/> CI \$35 (US \$43)	<input type="checkbox"/> CI \$35 (US \$43)	\$
	Senior	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	\$
ADD MEAL PASSES (For Seniors & Public School Teachers Only):				
Wednesday Meals	<input type="checkbox"/> CI \$15 (US \$19)	<input type="checkbox"/> CI \$15 (US \$19)	\$	
Thursday Meals	<input type="checkbox"/> CI \$15 (US \$19)	<input type="checkbox"/> CI \$15 (US \$19)	\$	
Friday Meals	<input type="checkbox"/> CI \$15 (US \$19)	<input type="checkbox"/> CI \$15 (US \$19)	\$	
GRAND TOTAL:			\$	

PAYMENT	
<input type="checkbox"/> Local Bank Transfer (see page 2 for details)	
<input type="checkbox"/> Wire Transfer (see page 2 for details)	
<input type="checkbox"/> Please charge my credit card (circle one): VISA MasterCard Discovery	
CARD NUMBER	EXPIRY DATE
NAME ON CARD	SECURITY CODE
CARDHOLDER SIGNATURE	DATE

STEM 2016 REGISTRATION FORM (continued)

LOCAL BANK TRANSFER:

If you have a local (Cayman Islands) bank account with Cayman National or Royal Bank of Canada, you may pay via internal bank transfer.

Please select "UCCI" as the payee and please include "STEM Carib 2016" in the reference field.

WIRE TRANSFER:

PAY TO: J.P. Morgan Chase
1 Chase Manhattan Plaza
New York, N.Y. 10081 U.S.A.

Swift: CHASUS33
ABA # 021 0000 21
F/C: Royal Bank of Canada, Grand Cayman
A/C # 001 1 153 103 Swift: ROYCKYKY
For further credit to The University College of the Cayman Islands
A/C # 2021061

If you have any questions, please contact:
UCCI Administration – Accounts Department
1-345-623-8224

REGISTRATION POLICY:

Please note that your registration is NOT complete until payment in full has been received.

Upon your arrival at the conference, please proceed to Sir Vassel Johnson Hall at UCCI to check-in at the registration desk.

CONFERENCE LOCATION:

The conference will take place at UCCI (University College of the Cayman Islands, 168 Olympic Way, George Town, Grand Cayman).

All plenary sessions and receptions will take place in Sir Vassel Johnson Hall. Breakout sessions will take place throughout the UCCI Campus.

Please visit www.stem.ky for full details.

CANCELLATION POLICY:

All cancellation requests must be received in writing (via email to: events@ucci.edu.ky). Cancellations received in writing by September 26, 2016 will receive a full refund, less a \$10 administration fee. Cancellations received after September 26, 2016 will NOT receive a refund. There will be no refunds for no-shows or late arrivals. Substitutions are permitted (i.e. if you are unable to attend the conference, you may choose to send a colleague in your place, rather than cancelling your registration).

WHERE TO SUBMIT THIS REGISTRATION FORM:

BY EMAIL:

Please scan and submit your completed form to:
Email Address: events@ucci.edu.ky
Subject Line: STEM Registration

BY MAIL:

Please mail your completed form to:

Attn: Kristel Sanchez (STEM Registration)
University College of the Cayman Islands
168 Olympic Way, PO 702 GT
Grand Cayman, Cayman Islands KY1-1107

IN PERSON:

If you would like to drop-off your registration form in person, please bring your completed form to the Admin Office at UCCI and any of our Information Officers will be pleased to assist you.

If registering in person, you also have the option of paying your registration fee in cash.