



**Student Leadership Conference**  
**Southern NH University, Manchester, NH**  
**Thursday, October 16, 2025, from 9:00 am – 2:30 pm**  
Proudly Sponsored by the New England League of Middle Schools

The registration fee includes all conference materials. Teams are responsible for lunches, which can be brought or purchased through campus facilities. If needed, call the NELMS office at (877) 402-7627 or email [nelms@nelms.org](mailto:nelms@nelms.org) for additional information.

**Questions? Please contact us at [nelms@nelms.org](mailto:nelms@nelms.org)**  
**Confirmations sent to the Advisor by e-mail only! One team per form.**

Advisor's Name: \_\_\_\_\_ Professional Position: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

School: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_ NELMS Member: ☐ YES ☐ NO

Principal's Signature: \_\_\_\_\_

(Required)

Southern NH University **requires** a release form for minors visiting campus for a day program. This document is online and must be completed for **ALL** students attending. The form will be directly submitted to SNHU. Please share [this link](#) with the parent/guardian for each attending student.

REGISTRATION FEE (Check Your Selection)	Member Team	Non-Member Team
A team will be made up of five students, and one advisor.*	<input type="checkbox"/> \$275	<input type="checkbox"/> \$400

\*-Additional middle school students and advisors can be added, please contact [NELMS](#) for more information and pricing.

**AMOUNT DUE =** \_\_\_\_\_

☐ Check (payable to New England League of Middle Schools) ☐ Purchase Order # \_\_\_\_\_ (**Must** be attached to this form)

☐ Credit Card (We accept MasterCard, Visa, and Discover.)

Card #: \_\_\_\_\_ Expiration Date (MMYY): \_\_\_\_\_

Security Code (from back of card): \_\_\_\_\_ Billing Telephone Number: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
(Street, City, State and Zip Code)

Print Cardholder's Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Complete and mail registration form with payment or signed purchase order to:  
**NELMS • PO Box 887 • Georgetown, MA 01833-0887 or by email: [nelms@nelms.org](mailto:nelms@nelms.org)**