

# 45<sup>th</sup> Annual Middle Level Conference

## **PRESENTER Registration Form ~ March 19 & 20, 2026**

**① Registrant Information** (Please print clearly)

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

E-Mail Address \_\_\_\_\_ Confirmations are sent by e-mail

School/Organization Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ NELMS Member:  Yes  No

<p><b>This form is for <u>APPROVED PRESENTERS ONLY!</u></b>  <b>Presenter Discount has been deducted from the prices listed below. Additional discounts will not be applied.</b></p>	
<p><b>② REGISTRATION FEE</b> (Check Your Selection)</p>	<p><b>2-Day</b> (Includes lunches-please make your selections below)</p>
<p><b>EARLY BIRD (Members Only)</b> thru 2/6/2026</p>	<p><input type="checkbox"/> \$ 325</p>
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<p><b>Standard/On-Site</b> after 2/6/2026</p>	<p><b>2-Day</b> (Includes lunches-please make your selections below)</p>
<p>Member</p>	<p><input type="checkbox"/> \$ 400</p>
<p>Non-Member</p>	<p><input type="checkbox"/> \$ 445</p>

**③ Thursday Lunch Selection Options** (Check Your Selection)

- Chicken, Bacon & Ranch Wrap  
  Ham & Cheese Wrap  
  Southwest Black Bean Patty Wrap (vegan option)  
 Includes Potato Chips, Cookie, Whole Fruit, and Bottled Water

**④ Friday Lunch Selection Options** (Check Your Selection)

- Thanksgiving Day Wrap  
  Italian Cold Cut & Cheese Wrap  
 Marinated Grilled Vegetables Wrap (vegan option)  
 Includes Potato Chips, Cookie, Whole Fruit, and Bottled Water

I have food allergies \_\_\_\_\_  
  I request a gluten free option.

**⑤ PAYMENT** (Completed payment must be received with registration form.)

**TOTAL PAYMENT 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: \_\_\_\_\_  
(Required)

Complete and mail registration form with payment or signed purchase order to:  
**New England League of Middle Schools • PO Box 887 • Georgetown, MA 01833-0887**  
 Phone: (877) 402-7627 • E-Mail: nelms@nelms.org

**Cancellations:** To read the complete cancellation policy please visit <https://www.nelms.org/cancel-policy>

In compliance with ADA (American Disabilities Act), if you require special assistance while attending this activity please contact NELMS 3 weeks prior to the event.