



October 14, 2008
(limited to 7th Grade boys)

9:30–10:00 a.m.	Registration
10:15–11:00 a.m.	Keynote Address
	Dr. Dennis Simon
	Associate Professor, Political Science, SMU
11:15 a.m.–12:00 p.m.	1st Breakout Session*
12:00–1:00 p.m.	Complimentary Box Lunch
1:00–1:50 p.m.	2nd Breakout Session*

*The breakout sessions for the boys will cover career and personal development topics. Several breakout sessions will be available in each time period. Session topics will be available two weeks prior to conference. Assignments will be made on a "first come" basis.

REGISTRATION

- ❖ The registration fee for the one-day conference is \$45 per person. Boys eligible for free and reduced price lunch pay \$10. Each teacher who registers five boys will receive a free registration. Please eat breakfast before you arrive on campus. A light lunch is included in the cost.
- ❖ Complete a registration form for **each boy and adult** attending (copy this form as needed). **Please mail registrations in complete groups.** All boys must be accompanied by either a teacher or parent. There must be one sponsor for every ten boys. Due to space limitations, the conference is limited to seventh grade boys and their sponsors.
- ❖ The keynote will be presented in the Umphrey-Lee 3rd floor Ballroom on the SMU campus. A map, parking directions, and confirmation letter will be Faxed to the school within two days of receiving the registrations. Space is limited. Please reserve early.
- ❖ Complete and detach the registration form and mail it with a check or purchase order to GSI. **Please make checks payable to SMU.**
- ❖ **Mail both check and registration forms to:** Gifted Students Institute,
PO Box 750383
Dallas TX 75275-0383

*Seventh Annual Conference for 7th Grade Gifted Boys
Gifted Students Institute ❖ Southern Methodist University*

PLEASE PRINT October 14, 2008 Teacher Parent Student

Name of participant _____ Grade Level _____

Home address _____ City _____ State _____ Zip _____

Campus and District _____

Name of Sponsor _____ E-mail address _____

School Address _____ City _____ State _____ Zip _____

School Phone _____ School FAX # _____

I have enclosed a check (Make payable to SMU)

I give permission for my son to attend this conference.

Parent Signature _____

Gifted Students Institute PO Box 750383 Dallas TX 75275-0383 214-768-0123 214-768-3147 FAX