

# 44th Annual SMU Women's Symposium - February 25, 2009 High School Staff, Faculty & Student Registration Form

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail Address \_\_\_\_\_

High School \_\_\_\_\_ Staff or \_\_\_\_\_ Student/ Grade \_\_\_\_\_

Have you attend the Women's Symposium before? \_\_\_\_Y \_\_\_\_N

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**Please check the following you plan to attend:**

(All selections do include the afternoon sessions.)

**44th Annual SMU Women's Symposium All-Day Program (includes all meal programs)**

\_\_\_\_\_ \$35 (per person) # \_\_\_\_\_ registrations = TOTAL \$ \_\_\_\_\_

**44th Annual SMU Women's Symposium Luncheon Speaker Program only**

\_\_\_\_\_ \$20 (per person) # \_\_\_\_\_ registrations or \_\_\_\_\_ 1 Table (8) \$160 = TOTAL \$ \_\_\_\_\_

**44th Annual SMU Women's Symposium Awards Dinner Program only**

\_\_\_\_\_ \$20 (per person) # \_\_\_\_\_ registrations or \_\_\_\_\_ 1 Table (8) \$160 = TOTAL \$ \_\_\_\_\_

**If you are attending the SMU Women's Symposium, which Interest Sessions will you be attending?**

\_\_\_\_\_ Interest Session 2:00-2:50 p.m. \_\_\_\_\_ Interest Session 3:00-3:50 p.m. \_\_\_\_\_ Interest Session 4:00-4:50 p.m. \_\_\_\_\_ none

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Payment method:  I have enclosed a check made payable to SMU Women's Symposium

Total # of registrants: \_\_\_\_\_

**TOTAL DUE: \$ \_\_\_\_\_**

If more than one registrant,  
please attach a list of all names attending.

**Refund will be made only if cancellation is made seven (7) days prior to the start of the program.**

**Mail your completed registration form and fee to:**  
*SMU Women's Symposium, P O Box 750172, Dallas, TX, 75275*

**Registration deadline Wednesday, February 18, 2009.**

For more information, please visit us at: **[www.smu.edu/womsym](http://www.smu.edu/womsym)**