



**2020 Champions for Young Children Symposium  
Registration Form  
Richland 2 Institute of Innovation (R2i2) - August 7, 2020  
763 Fashion Drive, Columbia SC 29229**

## Personal Information

Please type your information as you would like it to appear on conference materials.

Name\* \_\_\_\_\_ First Name for Name Badge\* \_\_\_\_\_

Primary Phone\* \_\_\_\_\_ Email\* \_\_\_\_\_

Address\* \_\_\_\_\_

City\* \_\_\_\_\_ State\* \_\_\_\_\_ Zip\* \_\_\_\_\_

\* Indicates Required Field

Are you a? ☐ Parent ☐ Professional ☐ Parent/Professional ☐ Other: \_\_\_\_\_

Do you work in any of the following sectors? Select only one.

- ☐ Early Childhood Education
- ☐ Early Intervention
- ☐ Child Care
- ☐ Head Start/Early Head Start
- ☐ Early Childhood Special Education
- ☐ Home Visitation
- ☐ Pre-K
- ☐ Other. Explain: \_\_\_\_\_

## Registration

Symposium registration fee includes the Symposium program, Symposium materials, Symposium parking at R2i2, continental breakfast and lunch. A confirmation will be mailed upon receipt of your paid registration.

Registration will be on a first-come basis. Payment must be attached to a completed registration form. **Participants' registration forms must accompany the purchase order and must list all participant(s) on the purchase order.** Purchase orders will be billed for all persons registered regardless of their attendance. Incomplete registrations will be returned. **Note: Registration fees are non-refundable.**

Symposium Registration Fee: \$ 40.00

Total Amount Enclosed \$ \_\_\_\_\_

## Special Assistance | Requests

Please indicate if you need any form of assistance or accommodations. Please be as specific as possible.

Please indicate if you have any dietary restrictions or special requests.

## Questions

If you are experiencing difficulties with the registration process or have general questions regarding the symposium, please contact Conference & Event Services at +1-803-777-9444 or [confs@mailbox.sc.edu](mailto:confs@mailbox.sc.edu).

Program questions can be directed to Tecoria Jones at [scic@mailbox.sc.edu](mailto:scic@mailbox.sc.edu).

## Method of Payment (Mail or Fax)

CEC Office Use Only:

DATE: \_\_\_\_\_ MTH \_\_\_\_\_ \$ \_\_\_\_\_ APPVL \_\_\_\_\_ A \_\_\_\_\_ CC 4 \_\_\_\_\_ Exp \_\_\_\_\_

**Please complete the payment information below and mail this registration form with your payment to:**

2020 Champions for Young Children  
Symposium Continuing Education and  
Conferences University of South Carolina  
1705 College Street, Suite 591  
Columbia, SC 29201

**OR**

**You may fax your registration form to 803-777-2663.**

Make all methods of payment payable to the: **University of South Carolina**. If you wish to charge your fees, enter your account number and sign below.

- ☐ Check
- ☐ Purchase Order-PO must be attached and show participant name(s)
- ☐ IIT (USC Departments Only) Operating Unit \_\_\_\_\_ Dept \_\_\_\_\_ Fund Code \_\_\_\_\_  
Class Field \_\_\_\_\_ PC Business Unit \_\_\_\_\_ Project \_\_\_\_\_ Activity \_\_\_\_\_
- ☐ MasterCard      ☐ American Express      ☐ VISA      ☐ Discover

### PLEASE PRINT:

**Note:** The charge on your credit card statement will appear from the University of South Carolina.

Name on Card: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CVV Number: \_\_\_\_\_ Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

**Please do not scan and email this form with credit card information. It is not secure and will not be accepted.**