



Phi Beta Delta Honor Society for International Scholars
33rd Annual International Conference
Friday, May 31, 2019 – Saturday, June 1, 2019
Faculty/Staff Members Group Registration Form

***Note: Discount applies only to faculty/staff members with a group of 5 for 5% or 10 for 10% discount.**

*If you are the lead of your group, please fill out the form.

Title (Dr./Ms./Mr./Professor) _____

First Name: _____ Last Name: _____

Institution: _____

Mailing Address: _____

City: _____ State or Country: _____ Zip: _____

Phone Number: _____

Email Address: _____

Registration (Fees in US Dollars)	Faculty/Staff Members	Non-members	Students
EARLY REGISTRATION (Nov 21, 2018-March 8, 2019)	\$250	\$300	\$125
REGULAR (March 9, 2019- May 2, 2019)	\$275	\$325	\$150
LATE (May 3, 2019- May 30, 2019)	\$300	\$350	\$175
ON-SITE (May 31, 2019 – June 1, 2019)	\$350	\$400	\$200

University lodging deadline: May 18, 2019
 To get the conference rate, hotel bookings must be made at the Clarion and Quality Inn by April 30th.

Group Lead: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #2 Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #3: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #4: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #5: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #6: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #7: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #8: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #9: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

Faculty/Staff Member #10: Full Name: _____

Please select your role. Faculty _____ Staff _____

If you request university lodging please select a room. Note: The linen fee is not included in the room charge.

Double Room per night \$35: _____ **Single Room per night \$45:** _____ **Linen \$15 (one-time fee):** _____

How many nights will you be staying. _____

List the nights you will be staying, e.g., 5/31, 6/1.... _____

Are you interested in a self-pay local field trip (\$20) on May 30th or June 2nd? **Yes:** _____ **No:** _____

*** Please add up all your expenses in the table below.**

Item	Cost
Registration Fee Total	\$
Lodging Fee Total	\$
One-time Linen Fee Total	\$
Field Trip Total	\$
Total Amount Due	\$

Note: After completing this form, please email it to Phi Beta Delta Headquarter at staff@phibetadelta.org. We will email you an invoice after we receive it. You can then mail out this form along with the check to the address below.

Indicate Payment Amount and Number: **Check Number:** # _____ **Amount: US\$** _____
Or Money Order Number: # _____ **Amount: US\$** _____

PLEASE ENCLOSE YOUR PAYMENT (Check or Money Order) WITH THIS FORM AND MAIL TO:

Phi Beta Delta Honor Society for International Scholars

Administration Building, Rooms 148, 150, & 152

California State University, San Bernardino

5500 University Parkway, San Bernardino, CA 92407

(The postmark date will be used to determine your registration fee. Check or money order must be included with this form.)