

2010 Museum Division Preconference Registration Form

Registration forms and payment **must be received by March 30, 2010**. A confirmation email will be sent upon receipt. For all inquiries after the deadline, please email NAEAmuseumpreconference@artbma.org.

Name _____
Professional Title _____
Institution _____
Address _____
City, State, Zip _____
Phone _____ Email _____
NAEA Membership Number _____

Please indicate your top six breakout sessions in order of your preference (1=highest, 6=lowest).

(Participants will be able to attend two sessions, *one in the morning* and *one in the afternoon*.)

- _____ Preserving Culture, Building Jobs, Engaging Audiences
- _____ Accessible Programs as Catalysts for Social Change
- _____ Museums and the Juvenile Courts: A Mutually Beneficial Relationship
- _____ Museums as Members of Society
- _____ A Place for Us? Cultivating Non-Traditional Museum Audiences
- _____ Visionary Artists as Creative Resources
- _____ Empowering Teens: New Voices for Change in the Museum
- _____ Art for Life: A Senior Outreach Case Study
- _____ Not To Be Ignored: Learning Begins at Birth
- _____ Art on Purpose: Collaborating for Social Justice
- _____ Intuition, Inspiration, and the Whole Person: 7 Educational Goals
- _____ "Wild Beasts" or New Perspectives?: Contemporary Art in a Historical Art Collection
- _____ Building Buy-in
- _____ Are race and socio economics in the picture of diversity at art museums?
- _____ Silkscreen Power! Radical Printing with Teens
- _____ Is Art Enough?

Please indicate if you need:

- _____ Vegetarian lunch
- _____ Kosher lunch
- _____ Gluten free lunch

Please check one:

- _____ \$65 NAEA Member
- _____ \$50 NAEA Student (*include copy of photo ID*)
- _____ \$80 Non-NAEA Member

Registrations received after March 30 must include an additional \$10 late fee.

Please email NAEAmuseumpreconference@artbma.org for late registration instructions.

Payment Method

- _____ Check (*Make checks payable to NAEA*)
- _____ Credit Card Type (*Please circle*) Visa Mastercard American Express
- Card Number _____ Expiration Date _____
- CCV # (*on back of card*) _____ Signature _____

Please print and complete this form and mail it with payment to:

**NAEA, Museum Education Preconference,
1916 Association Drive, Reston, VA 20191-1590**