



2012 Registration

NAGC Member Number _____

First Name _____ Last Name _____ M.I. _____

Mailing Address [home or work] _____

City _____ State _____ Zip Code _____

Work Phone _____ Home Phone _____

E-mail (primary) _____ home? or work? (secondary) _____ home? or work?

How would you like to register for the WOW?

- I am an individual interested in the following sessions (six-month archive access). \$29/per session.
NAGC Members registering for three or more - \$19/per session
- SITE LICENSE for all \$399
(all times Eastern)
 - January 18, 7:00 PM**
State of the Nation: Effective Advocacy Resources in a Challenging Climate
 - January 25, 7:00 PM**
The NAGC Pre-K – Grade 12 Gifted Programming Standards: Getting Started
 - February 1, 7:00 PM**
Assessments for Measuring Student Learning Outcomes
 - February 8, 7:00 PM**
Common Core State Standards: What Gifted Leaders Need to Know
 - February 15, 7:00 PM**
Instructional Strategies for Differentiated Assessments and Products Within the Classroom
 - February 22, 5:00 PM**
Action Plans: Bringing P-12 Gifted Programming Standards to Life
 - February 29, 7:00 PM**
P-12 Gifted Programming Standards: Models & Program Design
 - March 14, 7:00 PM**
Using the P-12 Gifted Programming Standards to Identify Low Income & Minority Students
 - March 28, 7:00 PM**
What Parents and Educators Should Know about RtI
 - April 4, 7:00 PM**
RtI & Twice-Exceptional Students: A Promising Fit
 - April 11, 7:00 PM**
The Intricacies of Twice-Exceptional Children: An Overview
 - April 18, 7:00 PM**
Double the Label; Double the Need: Strategies for Twice Exceptional Children Every Educator Should Know

Total \$ _____
No refunds are available

3 Registration Options

Online
www.nagc.org/wow.aspx

Fax
202/785-4248

Mail
NAGC
1331 H Street, NW, Suite 1001
Washington, DC 20005

PAYMENT Total Due in U.S. Funds \$ _____

Payment Method: Check Mastercard Visa AMEX Discover
Made payable to NAGC Purchase Order # _____ (Attach original with form)
Check No. _____

Name on Card _____

Card Number _____

Exp _____ Card Verification # _____ Billing Address Zip Code _____

Signature _____

National Association for Gifted Children, 1331 H Street NW, Suite 1001 Washington, DC 20005