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| 2017 Louisiana Collegiate Honors Conference  Registration, Fees Deadlines and Events | | |
| Institution Contact Information | | |
| Name of Institution/Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Dean/ Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Primary Contact for LCHC Conference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (This should be the person that handles communication and payment for the conference)  Primary Contact Phone: \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Primary Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
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| Institution Registration Fee  Includes up to 10 participants (faculty or student from institution) | $300.00 |
| Additional Participant Fee ($20.00 per person)  Applicable when institution brings more than 10 participants  Number of additional participants = \_\_\_\_\_\_\_\_\_ x $20.00 |  |
| **Registration forms are due by March 2, 2017**  **Registration Fees and Presentation Abstracts are due by Thursday, March 9, 2017** | Total |

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| **Conference Events Registration**  Please mark the events in which your institution will participate | |
| **\_\_\_** Quiz Bowl | Enter program’s team to compete in the LCHC 2017 Quiz Bowl, Saturday, |
| **\_\_\_** Paper Presentations | Students to present undergraduate research in a traditional conference format, Saturday, March 18 |
| **\_\_\_** Poster Presentations | Students create posters to display their work and receive feedback from peers, faculty and staff, Saturday, March 18 |

* Registration forms can submitted by mail or email and are due by Thursday, March 2, 2017
* Registration fees, in the form of a check, are due by Thursday, March 9, 2017
* Presentation and abstracts should be submitted by email to [julia@louisiana.edu](mailto:julia@louisiana.edu) by Thursday March 9, 2017
* **Checks should be made payable to UL Lafayette Honors Program**

Please send competed registration and fees to:

Dr. Julia C. Frederick

University Honors Program Fax: (337) 482-5049

P. O. Box 43647 Email: julia@louisiana.edu

Lafayette, LA 70504 Phone: (337) 482-5746 or my cell (337) 322-4670

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| 2017 Louisiana Collegiate Honors Conference  Participant Registration  \*Please make additional copies for additional participants |
| Participant Information\*  Please add as many as necessary. |
| Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Director/Dean \_\_\_\_\_ Faculty \_\_\_\_\_\_ Staff \_\_\_\_\_ Student \_\_\_\_  Title: \_.\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Special Meal Accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2016 Louisiana Collegiate Honors Conference  Quiz Bowl Entrance Form |

Quiz Bowl bracket drawings will take place Friday night. One representative from each team must be present. NAQT Rules will guide the Quiz Bowl competition.

Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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