

**Printable Registration Worksheet**  
**Information Needed to Register for the 2022 PASC State Conference**

This document is intended for delegates to review all information needed to fill out the Registration Form beforehand so they can complete the Google form in one sitting.

Personal Information

1. Name (First & Last) .....
2. Personal Email Address ..... (Please note that PASC may use this email to disseminate information about PASC programs and opportunities. You can opt out at any time.)
3. Phone Number .....
4. T-Shirt Size (adult sizes)  
      XS    S    M    L    XL    2XL    3XL

Emergency Information

5. Emergency Contact's Name (First & Last) .....
6. Emergency Contact Relationship .....
7. Emergency Contact's Cell Phone Number .....
8. Second Emergency Contact's Name (First & Last) .....
9. Second Emergency Contact Relationship .....
10. Second Emergency Contact's Cell Phone Number .....

PASC Member or Non-Member

11. Are you with a PASC member school?

Yes                      No

12. Which PASC Region are you in?

Region A: Erie, Crawford, Warren, Mercer, Venango, Forest, Clarion, Butler,  
Lawrence, Beaver

Region B: Allegheny, Washington, Greene

Region C: Armstrong, Indiana, West Moreland, Fayette, Somerset, Cambria

Region D: Mckean, Potter, Elk, Cameron, Clinton, Centre, Clearfield, Jefferson

Region E: Mifflin, Juniata, Huntingdon, Blair, Bedford, Fulton, Franklin

Region F: Perry, Dauphin, Lebanon, Cumberland, Adams, York, Lancaster

Region G: Tioga, Bradford, Lycoming, Sullivan, Union, Montour,  
Northumberland, Columbia, Snyder

Region H: Susquehanna, Wayne, Wyoming, Lackawanna, Luzerne, Monroe,  
Pike

Region I: Carbon, Schuylkill, Lehigh, Berks, Northampton

Region J: Bucks, Montgomery, Chester, Delaware, Philadelphia

13. Name of Your School \_\_\_\_\_

More Personal Information

14. School Colors (EX Boyertown is Red & Black) \_\_\_\_\_

15. PPID# \_\_\_\_\_ (For ACT 48 Credit)

16. Allergies - Check all that apply

- a. Food
- b. Medicines
- c. Both
- d. Neither

17. Specific details - Please list specific food, medicine, or other allergies, or enter "none."

\_\_\_\_\_

18. # of Years as an Advisor \_\_\_\_\_

19. How many elevator passes will your school need for the conference? \_\_\_\_\_

### Meal Choices

20. Please list any dietary accommodations that need to be met or enter "None." (Ex: vegan, vegetarian, gluten free)

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21. FRIDAY LUNCH Choice: Meal will also include Vegetable Soup and a tossed salad

- Italian Hoagie Wrap
- Chicken Pesto on a Kaiser Roll
- Roasted Vegetable Wrap

22. FRIDAY DINNER Choice: Circle one

- Catered with options of Hamburgers, hot dogs, chicken, and Mac'n Cheese plus chips, sides, and a drink
- Vegetarian option - Baked Ziti with side salad roll and butter
- Due to my food allergy listed above, I'm unable to choose from these options
- and need accommodations from the Boyertown food service.

23. SATURDAY LUNCH Choice: Meal will also include Vegetable Soup and a tossed salad

- Turkey and Provolone on a Kaiser Roll
- Buffalo Chicken Wrap
- Roasted Vegetable Wrap

### Transportation

24. Will you be using Conference host school provided transportation from the hotel to the school on **Friday morning**?

- Yes, I will use the provided transportation.
- No, I will provide my own transportation.

25. Will you be using Conference host school provided transportation from the school to the hotel on **Friday evening**?

- Yes, I will use the provided transportation.
- No, I will provide my own transportation.

26. Will you be using Conference host school provided transportation from the hotel to the school on **Saturday morning**?

- Yes, I will use the provided transportation.
- No, I will provide my own transportation.

27. How will you be traveling to the Conference?

- a. Car
- b. School Van
- c. Charter Bus
- d. Other \_\_\_\_\_

28. When do you plan to arrive at the Conference?

- a. Thursday night
- b. Friday morning

### Hotels

29. Which hotel will you be staying at?

- a. Hampton Inn; 430 W Linfield-Trappe Rd., Limerick, PA 19468
- b. Fairfield Inn and Suites; 99 Robinson St., Pottstown, PA 19464
- c. Best Western; 1600 Industrial Hwy., Pottstown, PA 19464
- d. Courtyard by Marriott - Valley Forge/Collegeville; 600 Campus Dr., Collegeville, PA 19426
- e. Staybridge Suites; 88 Anchor Pkwy., Royersford, PA 19468
- f. Residence Inn; 500 Campus Dr., Collegeville, PA 19426
- g. My school will NOT be staying in a hotel and will commute to the conference via our OWN transportation each day.

Invoice (\$95 per delegate and advisor - \$110 for non-members)

30. How many of the above students are members of the PASC Executive Board? Please include the name(s) of those Board members. (Ex. 3; Nicole Stout- Conference Co-Chair, Ava Desimone- Conference Co-Chair, Kaelin Drey- Conference Co-Chair, etc)

\_\_\_\_\_

31. Total # of Student Delegates

32. Total # of Workshop Presenters

33. Total # of Non-paying Board Members

34. Total # of Advisors

35. Total Amount Due (#Students + #Workshop presenters + #Advisors) \* \$95