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| A person smiling for the camera  Description automatically generated with medium confidence**Autism Spectrum Disorder (ASD)**  **Dr Nah Yong Hwee**  ***For Educators at All Levels***  ***Online via Zoom*** | | |
| **Event Dates** | **Type of Membership** | **Fee for Each Workshop** |
| * 1st July 2022 (Friday)   **and**   * 8th July 2022 (Friday)   **Important:**  **Participants must attend both days for the complete workshop** | * ASCD (Singapore) Life and Ordinary Members * ASCD (Singapore) Institutional Members   *(ASCD (S) Institutional Members may send up to a maximum of*  *6 (SIX) teachers at Member Rate* | **S$150.00** |
| * Non-Members   *Includes ASCD (S) Ordinary Membership valid until 31 Dec 2022* | **S$180.00** |
| **Become an ASCD (Singapore) Member!**  *(Payment for ASCD (S) membership) valid until 31 December 2022)*  *Ordinary Membership: S$30. Institutional Membership: S$300.00*  **Please request for Membership Form at** [**ascd@work-solutions.com**](mailto:ascd@work-solutions.com) | |
| Closing Date | Priority for ASCD (Singapore) Members until 30th May 2022.  Registration closes as soon as seats are all taken up (Only 50 seats available). | |

***Register here for Individual, Self-Paying Participants (For Schools use next page)***

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|  | Name of Participant | Email Address | Teaching Levels | Teaching Subject | Mobile Phone No. | ASCD Singapore Membership Type *(Please click one)* |
| (For breakout room allocation) | |
| 1 |  |  |  |  |  | Life  Ordinary  Non-Member |
|  | Postal Address (include postcode) | | | | | |
| 2 |  |  |  |  |  | Life  Ordinary  Non-Member |
|  | Postal Address (include postcode) | | | | | |

***Important Note:***

***Please complete the Confirmation of Payment Section on the next page.***

***Register for Schools, Organisations and Institutional Members on next page please >>>***

***Register here for Schools/Organisations*** *(ASCD (Singapore) Institutional Members and Non-Member Schools)*

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| Name of School or Organisation | |  | | | | | | | |
| Postal Address | |  | | | | Postcode | |  | |
| Name of Liaison Person | |  | | | | Office  Phone No | |  | |
| Designation of Liaison Person | |  | | | | Extension No | |  | |
| Liaison Person’s Email Address | |  | | | | Mobile Phone No | |  | |
| **Particulars of Participants from Schools**  *Note: Please complete the Confirmation of Payment Section* | | | | | | | | | | |
| No | Name of Participant | | Email Address | Teaching Levels | Teaching Subjects | | Mobile Phone No. | | ASCD Singapore Membership Type *(Please check one)* | |
| (For breakout room allocation) | | |
| 1 |  | |  |  |  | |  | | Life / Ordinary  Institutional  Non-Member | |
| 2 |  | |  |  |  | |  | | Life / Ordinary  Institutional  Non-Member | |
| 3 |  | |  |  |  | |  | | Life / Ordinary  Institutional  Non-Member | |
| 4 |  | |  |  |  | |  | | Life / Ordinary  Institutional  Non-Member | |
| 5 |  | |  |  |  | |  | | Life / Ordinary  Institutional  Non-Member | |
| 6 |  | |  |  |  | |  | | Life / Ordinary  Institutional  Non-Member | |

*Insert more rows if required.*

**Confirmation of Payment** *(Please select one option with “X”)*

|  |  |  |
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|  | 1 | Please **e-invoice** my school  **SBU No:**  **Attention to**: |
|  | 2 | Please issue a **hard-copy invoice** and send via email. Payment will be made immediately on receipt of invoice. (only for institutes, schools) |
|  | 3 | **Cash or Online Bank Transfers** can be made to our bank account:  Payee: ASCD (Singapore)  Bank Account No: DBS Bank A/c Number: 020-004574-4  Please email your transaction Advice to [ascd@work-solutions.com](mailto:ascd@work-solutions.com) |
|  | 4 | **Cheques** should be made payable to ASCD (SINGAPORE)  Cheque No: \_\_\_\_\_\_\_\_\_\_\_\_\_Amount of Cheque: S$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ is attached.  Please post original forms and payment to the address listed below.  ASCD (S) Secretariat, 73 Ubi Road 1, #07-62 Oxley BizHub, Singapore 408733 |