



REGISTRATION FORM
2014 OHA Annual Meeting
October 8-12, 2014
Madison Concourse Hotel, Madison, Wisconsin

Name (as you want it printed on your name badge): _____

Organization (if desired on name badge): _____

Mailing address: _____

City _____ State/Province _____ Postal Code _____

Email address _____ Phone _____

For more meeting information, go to www.oralhistory.org.

OHA prints a participant contact list that is distributed to attendees and exhibitors. May we include your contact information on the participant list? yes no

Please check your selections:

Annual Meeting Registration

- Member \$125 (early bird rate until Aug 15)
- Student Member \$40
- Become a Member \$175 (registration + first time member rate of \$50 for 2015)
- Become a Student Member \$75 (registration + student member rate of \$35 for 2015)
- Non-member \$175
- Guest of meeting attendee \$35

Workshops (Pre-registration and payment are required). Participants attending only a workshop are not required to pay the conference registration fee. Fees for workshops are \$40 for OHA members; \$50 for non-members. The Saturday Teacher workshop is free.

- Introduction to Oral History (Wed 8:00 AM – 12 PM) \$40/\$50
- OHMS: Enhancing Access to Oral History Online (Wed 8:00 AM – 12 PM) \$40/\$50
- Look Before You Leap: Transitioning to Video Oral History (Wed 1:00 – 4:00 PM) \$40/\$50
- Oral History and the Law (Wed 1:00 – 4:00 PM) \$40/\$50
- The Power of Performance: A Practical Guide to Writing an Oral History-Based Performance (Wed 1:00 – 4:00 PM) \$40/\$50
- Teacher Workshop: Principles and Best Practices for Oral History Education (grades 4-12) (Sat 9:00 AM – 12:00 PM) No charge

Meals

- Meal Package (Friday lunch, Saturday dinner, and Sunday breakfast) \$110
- Friday Luncheon \$40
- Saturday Awards Dinner \$50
- Sunday Business Meeting and Breakfast \$25
- Vegetarian meal(s) requested

Membership

You may renew your membership as part of Annual Meeting registration. Membership will be for the calendar year 2015.

- I wish to renew my membership at the regular rate of \$75.
- I wish to renew my student membership for \$35.

Donation

Tax-exempt contributions to the OHA Endowment Fund help support scholarships, the annual meeting, and other OHA initiatives.

- I wish to donate \$ _____ to the OHA Endowment Fund.

Payment

Please include and total the items you have selected.

Item Description	Fee
Conference Registration	
Workshops	
Meals	
Membership	
Donation	
TOTAL	

- Enclosed is my check payable to Oral History Association.
- I authorize a charge of _____ (include total from above) to my credit card.
 - Visa MasterCard Discover (we cannot accept American Express)
 - Card number _____ Expiration date _____ Security code _____
 - Card holder name _____ Signature _____

Housing

Conference participants are responsible for making their own lodging and transportation reservations.

- Our conference hotel is the Madison Concourse Hotel, One West Dayton St., Madison, WI 53703
- Discounted rates of \$147 per night (single/double) are available until September 15.
- Reserve a room by calling 1-800-356-8293. Make certain you request the **OHA conference rate**.

Mail form to: Oral History Association, Georgia State University, P.O. Box 4117, Atlanta, GA 30302-4117

Questions? Call 404-413-5751 or email oha@gsu.edu