

Membership Application

Name:	
Home Address:	
City, State, Zip, and County:	
Home Phone:	Cell Phone:
Home Email:	School/Organization:
School/Organization Address:	
City, State, Zip, and County:	
Work Phone:	_ Work Email:
Applicant's Signature:	Date:

Make out a \$20 membership check to SCDTSEA Mail to:

Dr. Harry Stille, SCDTSEA Treasurer P.O. Box 203

Due West, SC 29639-0203

Phone: 864-379-3080 Email: hstille@erskine.edu

SCDTSEA FALL CONFERENCE

December 1, 2017

Registration/Exhibitors start at 7:15 a.m.

SCDMV CONFERENCE ROOM

10311 Wilson Boulevard

Blythewood, SC 29016

(803) 896.5000

Check:	
Paying	g SCDTSEA Membership fee of \$20 (mail in application)
Early I	Bird Registration fee of \$30 before November 1, 2017
Fall Co	onference Registration of \$40 after November 1, 2017
Vendo	ors/Exhibitors Registration of \$100.00 (mail in application w/ fees)
Make checks	s payable to SCDTSEA
Dr. H P.O	d form(s) and fee(s) to: Harry Stille D. Box 203, West, SC 29639-0203

Email hstille@erskine.edu

Follow us on one of your favorite social networks:

Twitter: @realscdtsea Facebook: @SCDTSEA

Phone 864.379.3080

SCDTSEA POSTER CONTEST

For Driver Education/Driver Training Students

WHAT TOPIC? Driving Attitudes

WHO'S QUALIFIED? Any student taking course in 2017

WHERE? Teachers take posters to SCDTSEA Conference

WHEN JUDGED? December 1 at SCDTSEA Conference

POSTER GUIDELINES:

- 1. Poster to be standard poster size (22" X 28").
- 2. Student's complete name, address and phone on back of poster with the name of the school.
- 3. Eight posters maximum per school (one per student).
- 4. Posters will be judged by Exhibitors.
- 5. Eligible only if a school's representative is at the conference.

POSTER AWARDS:

First Place......\$300
Second Place.....\$200
Third Place.....\$100