

CHATTANOOGA FALL WORKSHOP REGISTRATION FORM
FRIDAY, OCT. 9, 2026 * UNIVERSITY OF TENNESSEE AT CHATTANOOGA

PLEASE PRINT CLEARLY; PHOTOCOPY THIS FORM IF ADDITIONAL SPACE IS NEEDED.

SCHOOL NAME _____ ADVISER _____

CONTACT EMAIL _____ PHONE _____

SCHOOL ADDRESS _____

STUDENT NAMES

INCLUDE ADDRESS & ZIP IF STUDENT WOULD LIKE INFO ABOUT LIPSCOMB UNIVERSITY

YEAR (CIRCLE)

MEDIUM (CHECK ALL THAT APPLY)

- | | | | | | | |
|-----------|----------------|------------------------------------|-----------------------------------|---------------------------------|--|--|
| 1. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 2. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 3. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 4. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 5. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 6. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 7. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 8. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 9. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 10. _____ | 7 8 9 10 11 12 | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |

ADVISER NAME(S)

MEDIUM (CHECK ALL THAT APPLY)

- | | | | | | |
|----------|------------------------------------|-----------------------------------|---------------------------------|--|--|
| 1. _____ | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |
| 2. _____ | ☐ Newspaper | ☐ Yearbook | ☐ Online | ☐ Literary Magazine | ☐ Broadcast/Video |

REGISTRATION FEES (SO THAT WE CAN HAVE AN ACCURATE COUNT FOR MEALS AND SEATING, PLEASE POSTMARK BY SEPT. 25.)

For THSPA member schools*

Total attendees _____ x \$19/each = _____

For non-member schools*

Total attendees _____ x \$24/each = _____

The costs include a voucher for an all-you-care-to-eat lunch at Crossroads Dining Hall.

If you are joining THSPA, please transfer the above total to the "Attendance at Fall Workshop" line on the THSPA Membership Application.

* To have your staff join THSPA and qualify for the discounted registration fee, fill out a membership form, available at www.Lipscomb.edu/THSPA, and mail it with this form. For the sake of convenience, you may pay for membership and workshop attendance with one check. THSPA membership is \$25 per medium if you join by Aug. 31; the fee is \$45 per medium if you join after Aug. 31. (Join by Aug. 31 and bring at least five students to the workshop, and you recoup your membership fee!)

Postmark this registration form, the THSPA Membership Application and check (made payable to Lipscomb Univ.) to:

Dr. Jimmy McCollum, THSPA
Lipscomb University
One University Park Drive
Nashville, TN 37204-3951