

Request to Attend Conference / Meeting

THIS FORM MUST BE COMPLETED AND APPROVED BEFORE REGISTERING FOR THE CONFERENCE/WORKSHOP.

Individual Attending Joyce Butler
Name of Conference A/CAPA (Attendance/Child Accounting Professional Association)
Location of Conference Virtual
Date(s) 4/11-12/2024 Days of Week Thursday & Friday

Are you an active member of the organization sponsoring this event? Yes No

Is this conference directly related to a classroom assignment? Yes No

Purpose of conference:

Training and updates with Child Accounting.

Number of school days absent for conference/meeting: _____

Total number of days requested for conference/meeting: _____ (include travel time)

Estimated time of departure: _____

Estimated time of return: _____

COMPLETE THE FOLLOWING ESTIMATIONS OF EXPENSES:

Travel: _____
Lodging: _____
Meals: _____
Registration: \$100.00
Other: _____
Total Estimated Expenditures: \$100.00

SUBSTITUTE NEEDED:
 Yes (# of Days) _____
 No

**All receipts must be itemized.
Tips are not reimbursable.**

Submitted by: _____ Date: _____

Recommended to Superintendent: Yes No

Account # _____ Principal Signature _____
Account # _____ Amount/% _____
Account # _____ Amount/% _____

Recommended to School Board for Approval: 
Superintendent Signature

Date Approved by School Board: _____

Distribution: Original - District Office Copy 1 - Teacher Copy 2 - Building Office

Save the Date! April 11 and 12, 2024

Registration open NOW!



Hi Joyce

Butler!

My

Account

[« Edit Registration](#)

Pay for Registration

Event	Quantity	Amount
2024 Spring Virtual Conference - MEMBER Registration (\$100)	1	\$100
	Total	\$100

Thank you for registering for the A/CAPA conference. We are looking forward to your participation. Please remit your payment as soon as possible.

If you are paying by check, please make check payable to:

Attendance/Child Accounting Professional Association of Pennsylvania (A/CAPA)

Mail payment check to:

Blue Chip Management Services, Inc.

303 Concord Ave., Exton PA 19341 or contact Blue Chip directly for ACH payment details:

If you require ACH payment information or have questions, please contact:

Carol Tamney at Blue Chip Management

610-594-9975

[cmt@bluechipmanage.com \(mailto:cmt@bluechipmanage.com\)](mailto:cmt@bluechipmanage.com)

Disclaimer: Thank you for registering for the A/CAPA conference. Please remit your payment as soon as possible. If payments are not received prior to the conference, A/CAPA reserves the right to cancel your registration.

Event Resources

Documents

- Spring Virtual 2024 Conference Session Discriptions  

DETAILS

Start:

[April 11 \(2024-04-11\)](#)

End:

[April 12 \(2024-04-12\)](#)

Event Category:

Conferences

VENUE

Online – Virtual

For information on A/CAPA, please contact:

[info@acapa.org \(mailto:info@acapa.org\)](mailto:info@acapa.org)

Compliance