

WHEN 7 OR MORE MEMBERS FROM THE SAME WORKPLACE REGISTER, RECEIVE THE 8TH REGISTRATION FREE.

ORGANIZATION INFO	RMATION							
ORGANIZATION/EMPLOYER NAME:								
STREET ADDRESS:								
СІТУ:			STATE:		Z	P CODE:		
PHONE: FAX:								
CONTACT INFORMATI					_			
CONTACT NAME:					ASHA ACCOUNT NO.:			
PHONE:								
■ IN-PERSON RATES				■ VIRTUAL LIBRARY RATES				
REGISTRATION CATEGORIES	EARLY BIRD (8/1-8/31)	ADVANCE (9/1-9/30)	REGULAR (10/1-10/31)	ONSITE (11/1)	REGISTRATION CATEGORI	ES EARLY BIRD (8/1-10/31)	ONSITE (11/1-11/28)	
ASHA Member/Affiliate	□ \$390	□ \$440	□ \$490	□ \$540	ASHA Member/Affiliat	<u> </u>	□ \$390	
New Member	□ \$290	□ \$340	□ \$390	□ \$440	New Member*	□ \$249	□ \$290	
NSSLHA Member	S225	S225	\$225	S225	NSSLHA Member	☐ \$165	☐ \$165	
			erson Total: \$		Vir	ual Library Total: \$		
■ REGISTRANT INFORM	IATION	111-1	erson iotai, p		- 411	uai bibiai y iotai: \$		
REGISTRANT 1 NAME:				REGISTRAN	T 5 NAME:			
EMAIL:								
ASHA ACCOUNT NO.: REGISTRATION CATEGORY:			ASHA ACCOUNT NO.: REGISTRATION CATEGORY:					
VACCINE VERIFICATION CODE:				VACCINE VERIFICATION CODE:				
	REGISTRANT	1 TOTAL COST:	\$		REGIS	TRANT 5 TOTAL COST: \$		
REGISTRANT 2 NAME:					T 6 NAME:			
EMAIL:								
ASHA ACCOUNT NO.: REGISTRATION CATEGORY: VACCINE VERIFICATION CODE:				ASHA ACCOUNT NO.: REGISTRATION CATEGORY: VACCINE VERIFICATION CODE:				
VACCINE VERIFICATION CODE.		REGISTRANT 2 TOTAL COST: \$						
REGISTRANT 3 NAME:				RECISTRAN	T7 NAME:			
EMAIL:					TT NAME,			
<u>'</u>	REGISTRATION CATEGORY:							
VACCINE VERIFICATION CODE:				VACCINE VERIFICATION CODE:				
	REGISTRANT	3 TOTAL COST:	\$		REGIS	TRANT 7 TOTAL COST: \$		
REGISTRANT 4 NAME:				REGISTRAN	T8 NAME:			
EMAIL:				EMAIL:				
ASHA ACCOUNT NO.: REGISTRATION CATEGORY:			ASHA ACCOUNT NO.: REGISTRATION CATEGORY:					
VACCINE VERIFICATION CODE:			VACCINE VERIFICATION CODE:					
	REGISTRANT	4 TOTAL COST:	\$		REGIS	TRANT 8 TOTAL COST: \$	FREE	
■ METHOD OF PAYMEN					rchase orders are <u>not</u> accepted. one transaction to receive discou	nt.		
CHECK: PAYABLE TO ASHA	CHARGE:	UVISA U	MASTERCARD	DISCOVER				
MAIL TO: ASHA Convention CARD NUMBER:				TOTAL PAYMENT": \$				
c/o SPARGO and Associates			CVV:		**Yo	**Your "TOTAL PAYMENT" may be adjusted if your registration is not postmarked on or before		
11208 Waples Mill Road					your registration is not postmarked on or before the registration deadlines shown above.			
Suite 112 Fairfax, VA 22030	CARDHOLE	DER SIGNATURE:						
• '	d d t ti			: d D-1:-:	as at convention aska ora/servi	/		

I acknowledge that I have read and agree to the published Convention Services and Policies at convention.asha.org/services-and-policies/.

Individuals who fall under one of the membership categories with an asterisk () and who are subscribed to the ASHA Learning Pass will receive a \$100 discount on their registration fee.

The discount is for individual subscribers only. Those receiving the Learning Pass through a group subscription, such as through their employer, are not eligible. You must already be subscribed to the Learning Pass when you register; the discount cannot be applied retroactively. The discount will automatically be applied when you sign in to register.

Group discount applies to ASHA members, affiliates and NSSLHA members only. Group discount does not apply to preconference workshops or special event tickets. To receive group discount, payment must be made in one transaction. Discount can only be applied to the lesser registration fee. Badges will be mailed to each registrant at the address provided above.