



On-Site Registration PAGE 1

International Registrants

	Yes	No
CASLPA Member	<input type="checkbox"/>	<input type="checkbox"/>
RCSLT Member	<input type="checkbox"/>	<input type="checkbox"/>
SPA Member	<input type="checkbox"/>	<input type="checkbox"/>
IALP Member	<input type="checkbox"/>	<input type="checkbox"/>
ISA Member	<input type="checkbox"/>	<input type="checkbox"/>
CPLOL Member	<input type="checkbox"/>	<input type="checkbox"/>

(Required for member discount on registration fee)

Professional Data

Certification (choose one)

- Aud SLP
 Dual Other

Is this your first ASHA Convention?

- Yes No

How many years have you been in your profession?

- 0-3 4-10
 11-15 over 15

ASHA or NSSLHA Membership # _____

Required for member discount on registration fee

First Name _____ M.I. _____ Last Name _____

Mailing Address: H W Street _____

City _____ State _____ Zip/Postal Code _____

Phone _____ Fax _____

E-mail (for confirmation use) _____ Country (if other than US) _____

I do not want my e-mail address shared with exhibitors.



If you require special assistance to participate in the Convention, please go to ASHA Registration.

Badge Information

This information will appear on your badge.

First Name _____

Facility/University/Employer _____

City _____ State _____

1 On-Site Registration Fees

ASHA Member (A)	<input type="checkbox"/> \$450
New Professional ASHA Member (J) (Member from 1-3 years)	<input type="checkbox"/> \$350
ASHA Graduate Student Member (G)	<input type="checkbox"/> \$235
Life Member (L)	<input type="checkbox"/> \$60
NSSLHA Member (S)	<input type="checkbox"/> \$235
NSSLHA New Applicant (includes \$60 NSSLHA Membership Fee) (H)	<input type="checkbox"/> \$295
General Registration (N)	<input type="checkbox"/> \$900
Related Professional (P)	<input type="checkbox"/> \$550
International Affiliate (CASLPA, IALP, ISA, RCSLT, or CPLOL Member) (I)	<input type="checkbox"/> \$450

One Day Registration Fees

<input type="checkbox"/> Thursday	
<input type="checkbox"/> Friday	
<input type="checkbox"/> Saturday	
ASHA Member (D)	<input type="checkbox"/> \$240
Related Professional (R)	<input type="checkbox"/> \$340
Non-Member (Y)	<input type="checkbox"/> \$400
NSSLHA Member	<input type="checkbox"/> \$150
ASHA Graduate Student Member	<input type="checkbox"/> \$150

1. Enter registration fee here \$ _____

2 Accompanying Person

An accompanying person is a guest attending in a social capacity only.
Guest status does not include attendance at any professional or scientific sessions.

First Name _____ Last Name _____ \$75

First Name _____ Last Name _____ \$75

2. Enter accompanying person total here \$ _____

Degree Designator Codes

For Doctoral

- Aud** Doctor of Audiology
- PhD** Doctor of Philosophy
- ScD** Doctor of Science
- EdD** Doctor of Education
- DA** Doctor of Arts
- SLPD** Doctor of Speech-Language Pathology
- OD** Other Doctorate

For Master's

- MA** Master of Arts
- MCD** Master of Communication Disorders
- MHS** Master of Health Science
- MS** Master of Science
- ME** Master of Education
- MSP** Master of Speech Pathology
- OM** Other Master's degree

For Bachelor

- BA** Bachelor of Arts
- BS** Bachelor of Science
- BE** Bachelor of Education
- BHS** Bachelor of Health Science
- OB** Other Bachelor's degree

For Associate

- AA** Associate of Arts
- AS** Associate of Science
- AAS** Associate of Applied Science

Area of Study Codes

- AS** Associate of Science
- AUD** Audiology
- OTH** Other
- CSD** Communication Science & Disorders
- SLA** Speech-Language Pathology Assistant
- SLP** Speech-Language Pathology
- SPA** Speech-Language Pathology and Audiology

3 Course Fees

Fill in blanks with course numbers. Many short courses are sold out. You will not be charged if a course you indicate is sold out.

\$60 each; \$30 for Division Sponsored Short Courses if you are a Division Member.

	Thursday	Friday	Saturday
Morning Short Courses	S C	S C	S C
Afternoon Short Courses	S C	S C	S C

3. Enter registration fee here \$ | | | |

4 Special Event Tickets

ASHFoundation JazzFest Fundraiser

You may purchase one ticket at \$100 and up to two guest tickets at \$50 each.

- Foundation JazzFest Registrant ___ x \$100 _____
- Foundation JazzFest Guest ___ (limit 2) x \$50 _____
- I can't attend, but would like to donate to the Foundation. _____

Special event tickets are nonrefundable. 4. Enter special event ticket total here \$ | | | |

5 Join NSSLHA

NSSLHA Application Information

	Degree Designator	Area of Study	Date Expected/Conferred (MM/YYYY)
Doctoral			/
Master's			/
Bachelor			/
Associate			/

Payment Total

(total lines 1-2 on page 1 and lines 3-4 on page 2)
Payment must accompany registration form.

\$ | | | |

Check made payable to ASHA Check number: _____

Visa

MasterCard

(Present credit card to Registration clerk)