

2017 ISHA CONVENTION PRE-REGISTRATION FORM

DATES: APRIL 20 - 22 (Thursday, Friday, and Saturday)

LOCATION: Sheraton Indianapolis City Centre - 31 W Ohio St - Indianapolis, IN 46204

PLEASE NOTE: HOTEL RESERVATIONS MUST BE MADE BY March 24th to receive the ISHA Convention Room Rate (\$179/SINGLE - includes overnight parking).

REGISTRATION OPTIONS:

1) YOU CAN NOW REGISTER ONLINE! Simply go to: www.isha.org and click on 2017 CONVENTION (it's quick, efficient and convenient) - or **2)** complete both sides of this form and fax along with credit card payment to: 317-481-1825 or **3)** complete both sides of this form and mail along with payment to:

ISHA CENTRAL OFFICE ~ 3125 Dandy Trail, Suite 110 ~ Indianapolis, IN 46214-1474

(postmarked no later than April 3, 2017)

PLEASE check the following and complete the session registration checklist:

REGISTRATION FEES

	ENTIRE CONVENTION	ONE-DAY ONLY
___ ISHA Member*	___ \$175 (after 4.3.17 - \$225)	___ \$125 (\$150)
___ Non-Member	___ \$350 (after 4.3.17 - \$400)	___ \$300 (\$325)
___ Student Member*	___ \$30 (after 4.3.17 - \$50)	___ \$15.00 (\$20)
___ Student Non-Member	___ \$45 (after 4.3.17- \$65)	___ \$25.00 (\$30)
___ Life Member*	___ \$75 (after 4.3.17 - \$100)	___ \$35.00 (\$50)
___ Handouts On 2 GB Flash Drive	\$10.00	
___ Breakfast & Learn	\$30.00	

On-Site registration fees are shown in parentheses; *Member Fee also applies to IL, OH, KY, MI Sp/Hrg Association Members. Pre-registrations postmarked after April 3, 2017, will be processed as on-site registration fees. Applications for membership must be approved by April 3, 2017 to qualify for member rates. Applications for membership will be taken but cannot be approved at the convention. Members of out-of-state associations must submit proof of membership.

Please circle one: SLP AUD

Will you be applying for ASHA CEUs? _____ **ASHA CEUs (No Charge)**

REGISTRATION FEE TOTAL \$ _____ *(Late and on-site fees are shown in parentheses)*

Total payment: \$ _____ METHOD OF PAYMENT: _____ Check _____ Credit Card _____ PO

Credit Card Number: _____ **Exp. Date:** _____ **CVV/CSV Code** _____

Name as it appears on the card: _____ **Zip Code for Card:** _____

Signature: _____

If paying by Purchase Order, please list PO #: _____

PLEASE NOTE: Make checks payable to ISHA (and mail before April 3 to take advantage of the early bird rate)

Mail to: ISHA CONVENTION

3125 Dandy Trail, Suite 110 - Indianapolis, IN 46214-1474

or fax with credit card information to 317-481-1825

Refund Policy: A refund minus \$15.00 will be granted if ISHA receives a written request by April 3, 2017.

All refund requests must be e-mailed to ann@centraloffice1.com with subject: ISHA REFUND 2017

Name: (as preferred on name tag) _____

Title: _____ SLP: _____ Audiologist: _____

Work/School Affiliation: _____

Preferred Mailing Address: _____

City: _____ St: _____ Zip: _____

Telephone: Home: () _____ Work: () _____

E-mail: _____

Is the address you provided above home or work? _____

PLEASE NOTE: Registration is not complete until session options have been checked on other side.

(See other side)

ISHA CONVENTION 2017 - SESSION REGISTRATION

Name:	FRIDAY, APRIL 21	SATURDAY, APRIL 22
THURSDAY, APRIL 20	8:00 - 9:30 am Breakfast & Learn - Add Fee \$30 ___ Kranowitz	8:00 - 9:45 am Keynote/Honors and Awards ___ Fairchild
9:00 - 9:30 am ___ Business Meeting	10:00 - 11:30 am ___ Knollman-Porter Pt. I ___ Brummel-Smith ___ Griffin ___ AAC World - Rang/Mankey	10:00 - 11:30 am ___ Praxis Bowl
9:45 - 10:45 am - Keynote ___ Page	12:00 - 1:30 pm ___ Strines ___ Ansaldo/Hopf ___ Souto ___ AAC World - Rang/Mankey	12:30 - 1:30 pm ___ Student Posters
11:00 am - 12:30 pm ___ Thornton	2:00 - 3:30 pm ___ Knollman-Porter Pt. II ___ Griffin ___ Wright ___ Grooms	1:30 - 3:00 pm ___ Sweeney ___ Quesal ___ Pollens ___ Foley
2:00 - 3:30 pm ___ Covert ___ Champion et al. ___ Harper ___ Commons	4:00 - 5:30 pm ___ Griffin ___ Fairchild ___ Hurley ___ Shepler	3:15 - 4:45 pm ___ Sweeney ___ Quesal ___ Pollens ___ Shine/Calisto
4:00 - 5:30 pm ___ Brummel-Smith ___ Rademacher/Risser ___ Bradburn ___ Matthews		
6:30 - 8:30 pm ___ Movie Night		

**THIS FORM IS
REQUIRED WITH
REGISTRATION!!!
PLEASE CHECK ALL
SESSIONS YOU PLAN
TO ATTEND**



Early-bird
deadline ends
April 3rd

Please send registration form to:
ISHA CENTRAL OFFICE - 3125 Dandy Trail, Suite 110 - Indianapolis, IN 46214
Or FAX with credit card information to 317-481-1825 ~ Questions: Call—317-916-4146



(See other side)