

ATTENDEE

REGISTRATION FORM



MOMENTUM WHERE VISION MEETS ACTION

2026 ASHA CONVENTION • INDIANAPOLIS, IN • NOVEMBER 19-21

SECTION 1: REGISTRANT INFORMATION

NAME: _____ ASHA ACCOUNT NUMBER: _____

MAILING ADDRESS – **SELECT ONE:** ☐ HOME ☐ WORK ☐ SCHOOL

STREET: _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____

PHONE: _____ FAX: _____ EMAIL: _____

☐ I am interested in receiving special offers and promotions from exhibitors by direct mail.

☐ I understand that to earn ASHA CEUs/PDHs and to receive my Certificate of Completion/Event Report officially documenting my participation, I must enter the sessions I attended in the ASHA Learning Center and submit my report no later than 11:59 p.m., ET, Tuesday, December 1, 2026

☐ I require reasonable accommodations and/or assistance to participate in the ASHA Convention.

Please select all that apply: ☐ Mobility ☐ Visual ☐ Auditory ☐ Other: _____

Note: ASHA's ability to arrange for accommodations is enhanced by early notification. We may be unable to respond to requests received after October 22.

If registering after this date, please send an email to accesssevents@asha.org.

SECTION 2: BADGE INFORMATION

FACILITY NAME: _____ CITY: _____ STATE: _____

SECTION 3: CONVENTION RATES & DEADLINES

If you are registering for Wednesday-only Pre-Convention Workshops, please proceed to Section 4 on the form.

Which day(s) do you plan on attending? ☐ All days ☐ Thursday only ☐ Friday only ☐ Saturday only

MEMBERSHIP CATEGORIES & RATE DEADLINES	EARLY BIRD RATE (AUGUST 3-31)	ADVANCE RATE (SEPTEMBER 1-30)	REGULAR RATE (OCTOBER 1-31)	ONSITE RATE (NOVEMBER 1-21)	SINGLE DAY RATE
Life Member	☐ \$99	☐ \$99	☐ \$99	☐ \$99	☐ \$99
Member	☐ \$419	☐ \$469	☐ \$519	☐ \$569	☐ \$319
National NSSLHA/ASHA Graduate Student Member	☐ \$245	☐ \$245	☐ \$245	☐ \$245	☐ \$185
ASHA-Certified Assistant	☐ \$269	☐ \$319	☐ \$369	☐ \$419	☐ \$169
New Professional Member	☐ \$319	☐ \$369	☐ \$419	☐ \$469	☐ \$219
Clinical Fellow	☐ \$319	☐ \$369	☐ \$419	☐ \$469	☐ \$219
Non-ASHA Certified Assistant	☐ \$319	☐ \$369	☐ \$419	☐ \$469	☐ \$219
International Affiliate	☐ \$419	☐ \$469	☐ \$519	☐ \$569	☐ \$319
Related Professional	☐ \$609	☐ \$659	☐ \$709	☐ \$759	☐ \$509
Non-member	☐ \$609	☐ \$659	☐ \$709	☐ \$759	☐ \$509

VIRTUAL PROGRAM (ONLINE ONLY)

ASHA Life Member ☐ \$99

All other categories, including non-members ☐ \$119

Note: Registration for the in-person Full Convention also allows you to claim CE credits for the Virtual Program. One-Day registration does NOT allow you to claim credit for Virtual Program sessions.

GUEST PASS

Register your guest(s) to receive a badge which will allow them to access the Exhibit Hall during open hours. Special activities will still require a ticket (see below to purchase). Guest status does not include attendance at any professional or scientific sessions. Persons under the age of 18 are not permitted in the Exhibit Hall.

Note: Individuals eligible for ASHA membership may not be registered as guests; they may purchase another registration category above or Exhibit Hall Only after November 1. The Exhibit Hall Only pass does not allow access to the Poster Hall or any sessions and may not be used in lieu of a full registration.

GUEST 1: First Name: _____ Last Name: _____ ☐ \$85

GUEST 2: First Name: _____ Last Name: _____ ☐ \$85

SECTION 4: PRE-CONVENTION WORKSHOPS

WEDNESDAY, NOVEMBER 19 • 1:00-4:00 P.M.	INDIANA RESIDENTS	NON-INDIANA RESIDENTS
☐ PC01: Advancing Dysphagia Care in the Digital Era: Data-driven Practice and Emerging Technologies	☐ \$40	☐ \$80
☐ PC02: Supporting Literacy for Children with Speech Sound Disorders	☐ \$40	☐ \$80
☐ PC03: Let Love Heal Their Wounds: Cultural Humility, Trauma-Informed Care, and Neurodiversity Affirming Practice	☐ \$40	☐ \$80

BY MAIL ONLY: ASHA Convention, P.O. BOX 791807, Baltimore, MD 21279-1807

QUESTIONS? CALL: Registration 864-541-0744 Housing 864-208-2571 • **VISIT:** convention.asha.org for full convention details.

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SECTION 5: SPECIAL EVENT HOSTED BY THE ASHFUNDATION: WEDNESDAY, NOVEMBER 18, 2:30 P.M.-5:30 P.M.

*This special event will not be available for ASHA CEUs or PDHs.

☐ **A Framework for Leading Complex Conversations: Facilitated Dialogue and Problem Solving** ☐ \$75

SECTION 6: SHORT COURSES (SC)

Short Course Fee: ☐ \$40 (Member and Non-member)

For more information please visit <http://bit.ly/4vgxcVB>.

THURSDAY, NOVEMBER 19

SHORT COURSE #	TIME
☐ SC01	10:30 A.M.-12:30 P.M.
☐ SC02	10:30 A.M.-12:30 P.M.
☐ SC03	10:30 A.M.-12:30 P.M.
☐ SC04	1:30 P.M.-3:30 P.M.
☐ SC05	1:30 P.M.-3:30 P.M.
☐ SC06	1:30 P.M.-3:30 P.M.
☐ SC07	4:00 P.M.-6:00 P.M.
☐ SC08	4:00 P.M.-6:00 P.M.
☐ SC09	4:00 P.M.-6:00 P.M.

FRIDAY, NOVEMBER 20

SHORT COURSE #	TIME
☐ SC10	8:00 A.M.-10:00 A.M.
☐ SC11	8:00 A.M.-10:00 A.M.
☐ SC12	10:30 A.M.-12:30 P.M.
☐ SC13	1:30 P.M.-3:30 P.M.
☐ SC14	1:30 P.M.-3:30 P.M.
☐ SC15	1:30 P.M.-3:30 P.M.
☐ SC16	4:00 P.M.-6:00 P.M.
☐ SC17	4:00 P.M.-6:00 P.M.
☐ SC18	4:00 P.M.-6:00 P.M.

SATURDAY, NOVEMBER 21

SHORT COURSE #	TIME
☐ SC19	8:00 A.M.-10:00 A.M.
☐ SC20	8:00 A.M.-10:00 A.M.
☐ SC21	8:00 A.M.-10:00 A.M.

SECTION 7: SPECIAL EVENT TICKETS

NOVEMBER 19 • 7:00 P.M.

ASHFoundation Fundraiser: ☐ \$150*

SECTION 8: DONATIONS**

I would like to make a tax-deductible donation to:

- ☐ ASHA-PAC \$ _____
☐ NSSLHA \$ _____
☐ ASHFoundation \$ _____

*Non-refundable items including donations to ASHFoundation, ASHA PAC, and NSSLHA contributions and ASHFoundation Event Tickets and ASHA-PAC Event Contributions.

Final Refund Request Deadline: Refund requests, registration fees, and other eligible items will not be accepted after **December 4, 2026**.

SECTION 9: METHOD OF PAYMENT

(Total Sections 3-8) **TOTAL PAYMENT:** \$ _____

NOTE: Your "TOTAL PAYMENT" may be adjusted if your registration is not postmarked on or before the registration deadlines shown in Section 3.

☐ **CHECK:** PAYABLE TO ASHA

Mail to: ASHA Convention
P.O. BOX 791807
Baltimore, MD 21279-1807

☐ **CREDIT CARD:** Credit card payments will be securely processed.

Do not include your credit card number on this form. You will be emailed a secure link to submit your credit card payment when your registration form is processed. You will receive an email confirmation after your registration has been completed.

☐ I authorize ASHA/Maritz, Inc. to charge my account for the "total payment" amount shown above.

☐ I acknowledge that I have read and agree to the published Maritz, Inc. terms of use and privacy policies at maritz.com/privacy/.

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

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