

Registration Form — Group

When **7 or more members** from the **same workplace** register, receive the **8th registration free**.

REVOLUTIONARY LEARNING

2018 ASHA Convention

Boston • November 15-17

EVOLUTIONARY PRACTICE

Organization/Employer Name _____

Street Address _____

City _____ State _____ Zip _____

Registration Category	Early Bird (8/1-8/31)	Advance (9/1-9/30)	Regular (10/1-10/31)	Onsite (11/1)
ASHA Member/Affiliate	\$390	\$430	\$455	\$495
New Member	\$290	\$330	\$355	\$395
NSSLHA Member	\$225	\$225	\$225	\$225

Registrant 1 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 1 Total Cost \$** _____

Registrant 2 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 2 Total Cost \$** _____

Registrant 3 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 3 Total Cost \$** _____

Registrant 4 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 4 Total Cost \$** _____

Registrant 5 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 5 Total Cost \$** _____

Registrant 6 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 6 Total Cost \$** _____

Registrant 7 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 7 Total Cost \$** _____

Registrant 8 Name _____ ASHA Account No. _____

email: _____ Registration Category _____ **Registrant 8 Total Cost \$** _____

With submission to this paper registration form, I acknowledge that I have read and agree to the published convention services and policies listed on ASHA's website.

Grand Total \$ _____

If we have questions when processing your registration, which registrant should we contact?

Name _____

ASHA Account No. _____

Phone _____

Email _____

Register Your Way

Call: 877-585-6005

Fax: 703-631-1167

Mail: 2018 ASHA Convention
c/o J. Spargo & Associates
11208 Waples Mill Road, Suite 112
Fairfax, VA 22030

Payment

Your registration cannot be processed without payment. Payment for all group registrations must be made in one transaction to receive discount. *Sorry, we cannot accept purchase orders.*

Check enclosed. Make payable to ASHA.

MasterCard Visa Discover

Card No. _____

Exp. Date _____

Name on Card _____

Signature _____

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

Visit convention.asha.org for full convention details.