

**WVSHA 47<sup>th</sup> Annual Convention  
April 22-25, 2009**

**REGISTRATION FORM**

Audiologist  SLP  Deaf Educator  Student  Other \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Pre-registration (must be received by 4-8-09):**

	<u>1 day</u>	<u>2 days</u>	<u>3-4 days</u>
WVSHA members	\$130	\$160	\$185
Non-members	\$185	\$220	\$245
Full-time students	\$10	\$15	\$20

**Late or Onsite Registration (received after 4-8-09):**

	<u>1 day</u>	<u>2 days</u>	<u>3-4 days</u>
WVSHA members	\$180	\$210	\$235
Non-members	\$235	\$270	\$295
Full-time students	\$20	\$30	\$40

**Help ensure adequate space, circle the sessions you plan to attend:**

W1 TH1 TH2 TH3 TH4 TH5 TH6 TH7 Social-Funny Bone  
F1 F2 F3 F4 F5 F6 F7 F8 F9 F10 S1 S2 S3

WVSHA member

Member of surrounding state association (attach copy of membership card to be eligible for WVSHA membership rate)

Registration Fee Due \_\_\_\_\_

Student sponsorship (optional) \_\_\_\_\_

Foundation Donation (optional) \_\_\_\_\_

WVSHA PAC Donation (optional) \_\_\_\_\_

**TOTAL Enclosed** \_\_\_\_\_

Check/Money Order (**Payable to: WVSHA**)

Purchase order (PO) attached

Will send PO later - will be responsible for payment if PO is not received

**Mail to:** Valerie Graham  
110 N 6<sup>th</sup> St  
Clarksburg, WV 26301

304-622-4327  
[ConventionPlanningVP@wvsha.org](mailto:ConventionPlanningVP@wvsha.org)

Please note any special requests or needs here: \_\_\_\_\_