



Conference Registration

PREFERRED ONLINE REGISTRATION IS AVAILABLE AT WWW.OSSPEAC.ORG/CONFERENCE.

Name: _____ Position: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

E-Mail Address: _____ Work Place: _____

(as you want printed on name badge - limited characters)

CONFERENCE FEES:

Pre-Registration fees include Sunday's Pre-Conference Sessions, Breakfast and Lunch Monday and Breakfast on Tuesday, Tuesday Post Conference Sessions, and Professional Development Contact Hours certificate.

* Non-Members may join OSSPEAC at the same time they register for the conference and pay the "Member" rate (Form Enclosed)

* One-day registration NOT AVAILABLE

Member Prior to September 17th-\$180.00 September 18-October 14th -\$195.00 \$ _____

(on-site registration available at the conference after 10/14—\$210.00)

Already renewed, membership for this 2011-2012

Membership form and payment included with this pre-registration \$ _____

Non-Member Prior to September 17th-\$225.00 September 18-October 10th-\$240.00 \$ _____

(on-site registration available at the conference after 10/10—\$255..00)

Full-Time Student (send copy of student ID)-**FREE** DOES NOT INCLUDE MEALS

MONDAY & TUESDAY MEALS: (Included with registration, however, please let us know which you plan on attending)

Monday Breakfast: Yes No

Monday Lunch: Lunch A (11:45-12:30) Lunch B (1:00-1:45) No Lunch (See page 3 for lunch details)

Tuesday Breakfast : Yes No

Tuesday Soup and Salad Lunch \$20.00 \$ _____

CONFERENCE PRE-REGISTRATION TOTAL: \$ _____

PAYMENT: Check/Purchase Order must accompany this preregistration form. Credit card accepted on-line at www.osspeac.org

Check # _____ - OR - Purchase Order # _____

SPECIAL CONSIDERATIONS: (please check the appropriate box)

I require a vegetarian meal

I will require disability assistance _____

PROFESSIONAL DEVELOPMENT CONTACT HOURS: ASHA PDCH (select only one)

This cost is included in the registration fee. Please indicate which type of credit you would like to receive so that the appropriate forms can be placed in your registration packet.

PLEASE CHECK THE APPROPRIATE BOX(ES):

I am interested in one (1) graduate credit hour from Ashland University.

I would like to volunteer to assist at the registration table.

I would be willing to serve as a session hostess (introduce the speaker)

Session Preferences: To help us best determine session size and room arrangements at the conference, please circle which session you are most interested in attending during each part of the conference. These session preferences do not guarantee your ability to attend the session as these sessions are still seated on a first-come, first-serve basis. (EXCEPT COMPUTER LABS, SEE BELOW)

IMPORTANT COMPUTER LAB INFORMATION: The computer lab sessions require registration and tickets due to demand and space limitations. **SESSIONS 13, 17, 32, 38, 48, and 53** are **red and bolded** below. Please circle the computer lab sessions you would like to attend. There is no additional charge for attending these sessions, but you must indicate your selection in order to receive a ticket in your registration packet. Tickets will be issued on a first-come, first-served basis.

SUNDAY SESSIONS: 1 2 3 4 5

MONDAY SESSIONS: 6 7 8 9 10 11 12 **13** 14 15 16 **17** 18 19 20 21 22 23 24 25 26 27 28 29 30 31 **32**

33 34 35 36 37 **38** 39

TUESDAY SESSIONS: 40 41 42 43 44 45 46 47 **48** 49 50 51 52 **53** 54 55 56 57 58 59 60

Please return the completed form and check/purchase order payable to OSSPEAC to:

Ellen A. Reaser, 205 Glendale Street, LaGrange, Ohio 44050

QUESTIONS: osspeac@windstream.net PHONE/FAX: 888-258-1032 Tax ID: 34-1743294

Registrations received postmarked after October 14th will be considered on-site registration and will not include meals.