

**REGISTRATION FORM • CSHA CONVENTION - MONTEREY, CA • APRIL 15-18, 2010 • POSTMARKED PRE-REGISTRATION DEADLINE: 3/31/10**

|   |      |             |        |     |
|---|------|-------------|--------|-----|
| Last Name:  |      | First Name: |        | MI: |
| Street Address:   |      |             |        |     |
| City:   |      | State:      | Zip:   |     |
| Hm#:  | Wk#: | Fax#:       | Email: |     |
| <input type="checkbox"/> SLP: License# _____ Exp: _____ <input type="checkbox"/> AUD: License# _____ Exp: _____ <input type="checkbox"/> Paraprofessional/SLPA <input type="checkbox"/> Student |      |             |        |     |
| Place of Employment (Students - Print name of University/College):  |      |             |        |     |

|   |  |  |  |
|---|--|--|--|
| <b>FULL (ALL 4 DAYS) CONVENTION REGISTRATION</b><br><i>Pre-registration fee excludes "Additional Options/Fees"(see below for those fees)</i><br><b>X</b> all courses attending to right → |  | Pre-Registration Before: 3/31/10:                                | After: 3/31/10 - Please Register On-Site |
| <b>MEMBER</b>   | Professional<br>Life/Paraprofessional (SLPA)/Student | <input type="checkbox"/> \$325<br><input type="checkbox"/> \$105 | <b>\$400</b><br><b>\$180</b>             |
| <b>NON-MEMBER, NEW OR RENEWING MEMBER</b> (Submit membership application with new or renewing membership)   | Professional<br>Paraprofessional(SLPA)/Student       | <input type="checkbox"/> \$445<br><input type="checkbox"/> \$140 | <b>\$520</b><br><b>\$215</b>             |

**THURSDAY:** (Please **X** all attending below)

|                                   |                                    |
|-----------------------------------|------------------------------------|
| <input type="checkbox"/> WS1 (.6) | <input type="checkbox"/> MS1 (.15) |
| <input type="checkbox"/> WS2 (.6) | <input type="checkbox"/> MS2 (.15) |
| <input type="checkbox"/> WS3 (.6) | <input type="checkbox"/> SC1 (.3)  |
| <input type="checkbox"/> WS4 (.6) |                                    |

|  |   |  |                              |
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| <b>TWO-DAY REGISTRATION:</b><br><i>Pre-registration fee excludes "Additional Options/Fees"(see below for those fees).....</i> <b>X</b> all courses attending to right →          |   |  |                              |
| <b>MEMBER - (X TWO DAYS BELOW)</b><br><input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY<br><input type="checkbox"/> SATURDAY <input type="checkbox"/> SUNDAY     | Professional<br>Paraprofessional/SLPA/Student | <input type="checkbox"/> \$275<br><input type="checkbox"/> \$95  | <b>\$350</b><br><b>\$170</b> |
| <b>NON-MEMBER - (X TWO DAYS BELOW)</b><br><input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY<br><input type="checkbox"/> SATURDAY <input type="checkbox"/> SUNDAY | Professional<br>Paraprofessional/SLPA/Student | <input type="checkbox"/> \$375<br><input type="checkbox"/> \$130 | <b>\$450</b><br><b>\$205</b> |

**FRIDAY:** (Please **X** all attending below)

|  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> WS5 (.6)                  | <input type="checkbox"/> SC8 (.3)     |
| <input type="checkbox"/> WS6 (.6)                  | <input type="checkbox"/> SC9 (.3)     |
| <input type="checkbox"/> WS7 (.6)                  | <input type="checkbox"/> SC10 (.3)    |
| <input type="checkbox"/> MS3 (.15)                 |                                       |
| <input type="checkbox"/> SC2 (.3)                  | <b>District Award Ceremonies: N/C</b> |
| <input type="checkbox"/> SC3 (.3)                  | <input type="checkbox"/> District 1   |
| <input type="checkbox"/> SC4 (.3)                  | <input type="checkbox"/> District 2   |
| <input type="checkbox"/> SC5 (.3)                  | <input type="checkbox"/> District 3   |
| <input type="checkbox"/> ILDS1 (up to .2)          | <input type="checkbox"/> District 4   |
| <input type="checkbox"/> MS4 (.15)                 | <input type="checkbox"/> District 5   |
| <input type="checkbox"/> MS5 (.15)                 | <input type="checkbox"/> District 6   |
| <input type="checkbox"/> MS6 (.15)                 | <input type="checkbox"/> District 7   |
| <input type="checkbox"/> MS7 (.15)                 | <input type="checkbox"/> District 8   |
| <input type="checkbox"/> SC6 (.3)                  | <input type="checkbox"/> District 9   |
| <input type="checkbox"/> SC7 (.3)                  | <input type="checkbox"/> District 10  |
| <input type="checkbox"/> President's Reception N/C |                                       |

|   |  |  |                              |
|---|--|--|------------------------------|
| <b>ONE-DAY REGISTRATION:</b><br><i>Pre-registration fee excludes "Additional Options/Fees"(see below for those fees).....</i> <b>X</b> all courses attending to right →         |  |  |                              |
| <b>MEMBER - (X ONE DAY BELOW)</b><br><input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY<br><input type="checkbox"/> SATURDAY <input type="checkbox"/> SUNDAY     | Professional<br>Life/Paraprofessional (SLPA)/Student | <input type="checkbox"/> \$225<br><input type="checkbox"/> \$85  | <b>\$300</b><br><b>\$160</b> |
| <b>NON-MEMBER - (X ONE DAY BELOW)</b><br><input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY<br><input type="checkbox"/> SATURDAY <input type="checkbox"/> SUNDAY | Professional<br>Paraprofessional/SLPA/Student        | <input type="checkbox"/> \$300<br><input type="checkbox"/> \$120 | <b>\$375</b><br><b>\$195</b> |

|   |   |    |  |
|---|---|----|--|
| <b>ADDITIONAL OPTIONS/FEES: X ALL courses attending to Right → →</b>  |   |    |  |
| <input type="checkbox"/> SLPA Breakfast: Tickets:# _____ @ \$10each=  |   |    |  |
| <input type="checkbox"/> Student Luncheon: (Friday) <input type="checkbox"/> Mexican Buffet: Tickets:# _____ @ \$10each=  |   |    |  |
| <b>Plenary Luncheon: (Saturday)</b><br><input type="checkbox"/> Salinas Valley Green Salad (with Chicken): Tickets:# _____ @ \$25each=<br><input type="checkbox"/> Salinas Valley Green Salad (Vegetarian): Tickets:# _____ @ \$25each= |   | \$ |  |
| <input type="checkbox"/> Plenary Luncheon: N/C (Please check this box if attending and NOT ordering lunch)<br>(This presentation qualifies for 45 minutes of continuing education credit)   |   |    |  |
| <b>Association Dinner: (Saturday)</b><br><input type="checkbox"/> Sirloin, Prawns & Salmon:# _____ @ \$60 each=<br><input type="checkbox"/> Portobello Mushroom Ravioli (Vegetarian):# _____ @ \$60 each=                               |   | \$ |  |
| <input type="checkbox"/> PAC Raffle:  | (1 ticket @ \$5) Tickets:# _____ @ \$5each=<br>(5 ticket bundle \$20) Bundles:# _____ @ \$20each= | \$ |  |
| <input type="checkbox"/> Student Scholarship Fund:  | (Toward complimentary convention registration for students)                                       | \$ |  |
| <input type="checkbox"/> Guest Badge: (Print Name(s) below)   | Badges# _____ @ \$10each=   | \$ |  |

**SATURDAY:** (Please **X** all attending below)

|   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Pacific Alumni Breakfast N/C |                                       |
| <input type="checkbox"/> WS8 (.6)                     | <input type="checkbox"/> MS12 (.15)   |
| <input type="checkbox"/> WS9 (.6)                     | <input type="checkbox"/> MS13 (.15)   |
| <input type="checkbox"/> MS8 (.15)                    | <input type="checkbox"/> SC16 (.3)    |
| <input type="checkbox"/> SC11 (.3)                    | <input type="checkbox"/> SC17 (.3)    |
| <input type="checkbox"/> SC12 (.3)                    | <input type="checkbox"/> SC18 (.3)    |
| <input type="checkbox"/> SC13 (.3)                    | <input type="checkbox"/> SC19 (.3)    |
| <input type="checkbox"/> SC14 (.3)                    | <input type="checkbox"/> SC20 (.3)    |
| <input type="checkbox"/> SC15 (.3)                    | <input type="checkbox"/> SC21A&B (.3) |
| <input type="checkbox"/> ILDS2 (up to .2)             | <input type="checkbox"/> SC22 (.3)    |
| <input type="checkbox"/> MS9 (.15)                    | <input type="checkbox"/> SC23 (.3)    |
| <input type="checkbox"/> MS10 (.15)                   | <input type="checkbox"/> SC24 (.3)    |
| <input type="checkbox"/> MS11 (.15)                   |                                       |

|  |                                  |
|--|----------------------------------|
| Guest Name(s) (Please Print): _____  |                                  |
| <b>Register Online: <a href="http://www.csha.org">www.csha.org</a></b>   | <b>TOTAL AMOUNT DUE \$</b> _____ |
| Checks and Money Orders Payable to: CSHA (\$25 Returned Check Charge)  |                                  |
| <b>PAYMENT BY CREDIT CARD:</b><br><input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> America Express <input type="checkbox"/> Discover <b>*Total Charge Amount \$</b> _____<br><small>*(If fees are not accurately computed, CSHA will debit Credit Card accordingly.)</small> |                                  |
| Account# _____   |                                  |
| Exp Date: _____ / _____  | Signature (Required): _____      |

**SUNDAY:** (Please **X** all attending below)

|                                     |
|-------------------------------------|
| <input type="checkbox"/> MS14 (.15) |
| <input type="checkbox"/> MS15 (.15) |
| <input type="checkbox"/> SC25 (.3)  |
| <input type="checkbox"/> SC26 (.3)  |
| <input type="checkbox"/> SC27 (.3)  |

|   |  |
|---|--|
| Mailing Address:<br>CSHA • 825 University Ave • Sacramento, CA 95825-6724 | Phone: (916) 921-1568<br>Fax: (916) 921-0127 |
| <b>FOR OFFICE USE ONLY</b>  |  |
| Total Amt Due: _____  | Check#: _____ PO Amt: _____                  |
| Total Amt Rec'd _____   | Check#: _____ PO#: _____                     |
| Balance Due: _____  | Check Amt: _____ Total Amt Rec'd _____       |

**Key:** WS = Workshop, SC = Short Course, MS = Mini Seminar, PS = Poster Session, ILDS = Interactive Lecture Demo Session. Number in parentheses indicates number of CE hours: (.15 = 1 1/2 hrs), (.3 = 3 hrs), (.6 = 6hrs). Maximum number of State & ASHA CEUs attainable = up to 24 hours.