

# SHAV 2012 ANNUAL CONFERENCE

March 14-17 • Sheraton Premiere at Tysons Corner • Vienna, VA

Registration can also be completed online at [www.shav.org](http://www.shav.org).

## COMPLETE THIS FORM AND RETURN IT TO THE SHAV OFFICE

- To receive the **early registration fee**, registration forms must be post marked **no later than February 3, 2012**. Full registration fee admits you to all functions except the special Short Course.
- Cancellations** will be accepted if request is received prior to March 1, 2012. A \$25 processing fee will be assessed for all refunds. No refunds will be granted after March 1.
- Conference badges must be worn for admittance to exhibits, sessions and Conference functions.

SHAV Membership Number \_\_\_\_\_

(Located on your mailing label above your name)

Name (preferred for badge) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

### CONFERENCE REGISTRATION FEES

\* Must be a current 2012 member to be eligible for special member rate:

	Early Reg. On or Before 2/3/12	After 2/3/12	Amount
<b>Conference Registration</b>			
2012 Member Rate*	\$155	\$185	\$
Non-Member	\$275	\$305	\$
Student or Life Member*	\$45	\$60	\$
Student Non-Member	\$70	\$85	\$
<b>Julie Hoffmann Short Course (Must be registered as a Conference attendee.)</b>			
Registration Fee	\$25	\$40	\$
<b>Presenter Registration</b>			
Professional	\$125	\$155	\$
Student	\$45	\$50	\$
<b>Special Audiology Registration Rate (1½ days)</b>			
2012 Member Rate*	\$125	\$155	\$
Non-Member	\$245	\$275	\$
<b>Single Day Registration</b> <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday			
2012 Member Rate*	\$105	\$135	\$
Non-Member	\$225	\$255	\$
Student or Life Member*	\$30	\$45	\$
Student Non-Member	\$55	\$70	\$
<b>PRE-CONFERENCE SEMINAR - Wednesday, March 14, 2012</b> <i>Voice Therapy Through the Ages: Vocal Health, Hygiene and Therapy for the Voice Disordered Client</i>			
Member Attending Conf.*	\$115	\$145	\$
Member not Attending Conf.*	\$135	\$165	\$
Non-Member	\$225	\$255	\$
Student or Life Member*	\$25	\$40	\$
Student Non-Member	\$50	\$65	\$
<b>Other</b>			
Membership Dues (see chart)			\$
Communication Disorders Foundation Financial Donation			\$
<b>TOTAL CONFERENCE PAYMENT</b>			<b>\$</b>

I am interested in volunteering as a facilitator for the following sessions:

Do you require any special assistance/dietary needs? \_\_\_\_\_

2012 Membership Dues	With PAC Donation	No PAC Donation
Voting Member	\$80.00	\$75.00
Associate Member	\$72.50	\$67.50
Joint Member	\$65.00	\$60.00
Student	N/A	\$22.50
Commercial	N/A	\$112.50

### PRESENTATION CHOICES

Please take a moment to check the Conference presentations and events that you plan to attend. Pre-registration is not required, however your selections will assist in planning.

#### Thursday Presentations and Events

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Session 2  | <input type="checkbox"/> Session 11 | <input type="checkbox"/> Session 20            |
| <input type="checkbox"/> Session 3  | <input type="checkbox"/> Session 12 | <input type="checkbox"/> Session 21            |
| <input type="checkbox"/> Session 4  | <input type="checkbox"/> Session 13 | <input type="checkbox"/> Session 22            |
| <input type="checkbox"/> Session 5  | <input type="checkbox"/> Session 14 | <input type="checkbox"/> Session 23            |
| <input type="checkbox"/> Session 6  | <input type="checkbox"/> Session 15 | <input type="checkbox"/> Session 24            |
| <input type="checkbox"/> Session 7  | <input type="checkbox"/> Session 16 | <input type="checkbox"/> Session 25            |
| <input type="checkbox"/> Session 8  | <input type="checkbox"/> Session 17 | <input type="checkbox"/> Session 26            |
| <input type="checkbox"/> Session 9  | <input type="checkbox"/> Session 18 | <input type="checkbox"/> CDF Auction Reception |
| <input type="checkbox"/> Session 10 | <input type="checkbox"/> Session 19 |  |

#### Friday Presentations and Events

- |                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Session 27 | <input type="checkbox"/> Session 34 | <input type="checkbox"/> Session 41                   |
| <input type="checkbox"/> Session 28 | <input type="checkbox"/> Session 35 | <input type="checkbox"/> Session 42                   |
| <input type="checkbox"/> Session 29 | <input type="checkbox"/> Session 36 | <input type="checkbox"/> Session 43                   |
| <input type="checkbox"/> Session 30 | <input type="checkbox"/> Session 37 | <input type="checkbox"/> Session 44                   |
| <input type="checkbox"/> Session 31 | <input type="checkbox"/> Session 38 | <input type="checkbox"/> Exhibitor Breakfast Sessions |
| <input type="checkbox"/> Session 32 | <input type="checkbox"/> Session 39 | <input type="checkbox"/> Poster Sessions              |
| <input type="checkbox"/> Session 33 | <input type="checkbox"/> Session 40 |   |

#### Saturday Presentations and Events

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Session 45 | <input type="checkbox"/> Session 49 | <input type="checkbox"/> Session 53                                    |
| <input type="checkbox"/> Session 46 | <input type="checkbox"/> Session 50 | <input type="checkbox"/> Session 54                                    |
| <input type="checkbox"/> Session 47 | <input type="checkbox"/> Session 51 | <input type="checkbox"/> SHAV Breakfast (Pre-registration is required) |
| <input type="checkbox"/> Session 48 | <input type="checkbox"/> Session 52 |  |

### METHOD OF PAYMENT

- Check (Payable to SHAV)     Visa     MasterCard  
 Purchase Order\* (attached)

\* If using a purchase order, payment and registration must be received by the early registration date to obtain the early registration fee otherwise, the late registration fee will be applied.

X \_\_\_\_\_  
Signature

EXPIRATION DATE  

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CREDIT CARD ACCOUNT NUMBER  

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**QUESTIONS?** Call the SHAV Office at **888-729-7428** or email [shavoffice@shav.org](mailto:shavoffice@shav.org).  
**Last, but not least! Mail or Fax Completed Registration Form To: SHAV, 3126 W. Cary Street #436, Richmond, VA 23221, Fax: 888-729-3489, Tax ID #23-7403298**