

## 2010 Attendee Registration Instructions

Before completing the registration form, please read the following information.

Please print clearly or type all information when filling out the attached registration form. Fill in all requested information completely. Failure to provide full and accurate information will delay the processing of your registration.

### 1. Badge Information

This information is for printing your badge only. Please list your last name and badge name. Please provide the city, state/province and country where you reside.

Please complete this information for your spouse and any child who will be attending the convention who is NOT participating in the Child & Teen Program. (There is a separate registration form for children participating in the Child & Teen Program.)

### 2. Registration Mailing Address

Please provide us with an email address, fax number, phone number and a mailing address so we can confirm your registration.

*Note: If you have changed your address, we encourage you to visit the AG Bell website at [www.agbell.org](http://www.agbell.org) to update your member record.*

If this is your first AG Bell convention, please check the appropriate box. There will be an orientation for new members and first-time attendees on Friday, June 25, from 12:00 to 12:45 p.m. Check the convention program for more details.

### 3. Communication Access

If you require accommodation to be able to participate in the convention, please select your preferred method from the options listed on the registration form. Deadline for requests is May 14, 2010.

### 4. Dietary Restrictions

Please indicate any dietary restrictions.

### 5. Registration Fees

In the appropriate category, please indicate the number of people attending. Registration is required for all adults and any child age 4 and above who is not registered for the Child & Teen Program. Multiply the number of attendees by the price and enter this figure in the far right column. Fees are payable in U.S. dollars only. Registrants will receive

written confirmation. Please keep this for your records.

Daily registrants are asked to circle the day they are attending in the space provided. All fees listed are in U.S. dollars:

<b>Member "Early Bird"</b> (ends April 2)	<b>\$315</b>
<b>Member Regular</b> (ends June 11)	<b>\$365</b>
<b>Member Onsite</b> (after June 11)	<b>\$415</b>
<b>Nonmember Regular</b> (ends June 11)	<b>\$425</b>
<b>Nonmember Onsite</b> (after June 11)	<b>\$475</b>
<b>One-Day (Select Day)</b>	<b>\$200</b>
<b>Volunteer Rate*</b>	<b>\$195</b>
<b>Student Rate**</b>	<b>\$195</b>

For information on group rates please email [2010convention@agbell.org](mailto:2010convention@agbell.org).

\* Watch for volunteer recruitment announcements on [www.agbell2010convention.org](http://www.agbell2010convention.org)

\*\*Student identification required to verify status.

Member rates apply to all family members provided at least one member of the family is a current member of AG Bell.

### 6. Short Courses/Ticketed Events

#### Short Courses:

Please check the appropriate box next to your selection, enter quantity and total.

#### Other Events:

Please fill this section out carefully. You are responsible for scheduling conflicts. Please check the appropriate box next to your selection, enter quantity and total. AG Bell will not maintain a waiting list for those events that sell out.

### 7. CEU Certification Fees

There is a \$15 fee for each certification required. Please check the appropriate boxes next to the CEU category, enter quantity and total.

### 8. Payment

Please enter the total calculated amount from all the above entries. Payment should reflect convention-related fees only. Payment should be made in U.S. dollars only. Payment must be received in order for the registration to be processed. Make all checks payable to Alexander Graham Bell Association. To better serve our members, AG Bell will process all convention registrations. Registration can be done online at [www.agbell2010convention.org](http://www.agbell2010convention.org); by email by completing and scanning the registration form with credit card payment information and emailing it to [2010convention@agbell.org](mailto:2010convention@agbell.org); by completing the registration form with credit card payment and faxing to 202-337-8314; or by mailing a completed registration form with check or credit card payment information to:

**AG Bell 2010 Convention**  
**Alexander Graham Bell Association**  
**P.O. Box 17487**  
**Baltimore, MD 21297-1487**  
**United States**

Envelopes must be postmarked by April 2, 2010, to qualify for the "Early Bird" registration fee. All registrations postmarked after April 2, 2010 will be handled as regular registrations.

### Refunds/Cancellations

Refunds for convention registration fees, short courses and ticketed events and CEUs, less a \$50 administrative fee, will be made only if cancellation is received in writing and postmarked by **June 9, 2010**. No refunds will be issued for cancellations postmarked after June 9, 2010. This includes refunds due to illness, late arrival, weather conditions and/or other travel difficulties. Credit balances and/or uncashed refund checks may not be used to purchase additional items on site.

# 2010 Biennial Convention Registration Form

## 1. BADGE INFORMATION *Please print my badge to read:*

First Name _____	Last Name _____	Badge Name _____
Company/Organization _____		
City _____	State/Province _____	Country _____
<input type="checkbox"/> Parent/Family <input type="checkbox"/> Professional <input type="checkbox"/> Deaf or Hard of Hearing Adult <input type="checkbox"/> Other _____		

### *Please print my spouse's badge to read:*

First Name _____	Last Name _____	Badge Name _____
City _____	State/Province _____	Country _____

### *Please print my child's badge to read:*

First Name _____	Last Name _____	Badge Name _____
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### *Please print my child's badge to read:*

First Name _____	Last Name _____	Badge Name _____
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### *Please print my child's badge to read:*

First Name _____	Last Name _____	Badge Name _____
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## 2. MAILING ADDRESS

Member ID Number (from the mailing label on your issue of Volta Voices) _____		
Street Address _____		
City _____	State/Province _____	ZIP/Postal Code _____
Country _____	Email Address (required for confirmation) _____	
Daytime Phone _____	Daytime Fax _____	

This will be my/our first AG Bell Convention

AG Bell Exhibitors may receive your mailing address in advance of the Convention.  
 Check here if you DO NOT want Exhibitor-related mailings.

By submitting this registration form, I/we agree to comply with all rules and conditions of the 2010 Convention ("Convention") of the Alexander Graham Bell Association for Deaf and Hard of Hearing ("AG Bell"), including all rules in the Convention brochure, future correspondence, and as may be posted at the Convention. If you do not receive a confirmation within 10 business days, please contact AG Bell to ensure your registration was received. Please refer to the Refund/Cancellation policy on page 14 for cancellation procedures and deadlines.

## 3. COMMUNICATION ACCESS

All educational sessions will be real-time captioned. Oral, Cued Speech and ASL interpreting services will be provided upon request and as resources are available. Deadline for requests is **May 14, 2010**. Please indicate your preference below:

ASL Interpreter   
 Oral Interpreter   
 Cued Speech Transliterators

## 4. DIETARY RESTRICTIONS

Gluten Free   
 Vegetarian   
 Kosher   
 Other \_\_\_\_\_

Individuals requiring special meals should contact AG Bell Convention staff no later than **June 1, 2010**, to make arrangements.

## 5. REGISTRATION FEES

### AG Bell Members

	Price	x	Quantity	=	Total
<input type="checkbox"/> Early Bird Member (before April 2)	\$315	x	_____	=	\$ _____
<input type="checkbox"/> Member Rate (before June 11)	\$365	x	_____	=	\$ _____
<input type="checkbox"/> Onsite Member (after June 11)	\$415	x	_____	=	\$ _____

### AG Bell Nonmembers\*

	Price	x	Quantity	=	Total
<input type="checkbox"/> Nonmember Rate (before June 11)	\$425	x	_____	=	\$ _____
<input type="checkbox"/> Onsite Nonmember (after June 11)	\$475	x	_____	=	\$ _____

\*Individual(s) registering as a full-conference nonmember will automatically receive a one-year membership in AG Bell, a bonus worth \$50.

### Other Rates and Fees

	Price	x	Quantity	=	Total
<input type="checkbox"/> One Day Rate (select a day) O-Fr O-Sa O-Su O-Mo	\$200	x	_____	=	\$ _____
<input type="checkbox"/> Student Rate**	\$195	x	_____	=	\$ _____

\*\*Student identification required at check-in.

## 6. SHORT COURSES / TICKETED EVENTS

You are responsible for any scheduling conflicts. Please fill out this section carefully.

Friday, June 25, 8:00 - 11:30am	Price	x	Quantity	=	Total
<input type="checkbox"/> Adults Aren't Just Big Babies!	\$75	x	_____	=	\$ _____
<input type="checkbox"/> Facilitating Auditory-Verbal Learning for Children with Impaired Executive Functioning	\$75	x	_____	=	\$ _____
<input type="checkbox"/> It's Not All About ABC's and 123's	\$75	x	_____	=	\$ _____
<input type="checkbox"/> Ladder to Literacy: A Six Step Process	\$75	x	_____	=	\$ _____
<input type="checkbox"/> No Hablo Ingles...Now What? Supporting Bilingualism in Homes	\$75	x	_____	=	\$ _____
<input type="checkbox"/> (Re)-Habilitation for Teens and Tweens Post Cochlear Implantation	\$75	x	_____	=	\$ _____

Friday, June 25, 1:00 - 4:30pm	Price	x	Quantity	=	Total
<input type="checkbox"/> Bilateral Cochlear Implants: CI Team Perspectives	\$75	x	_____	=	\$ _____
<input type="checkbox"/> Music & Language & Ears, Oh, My!	\$75	x	_____	=	\$ _____

Monday, June 28, 8:00 - 11:30am	Price	x	Quantity	=	Total
<input type="checkbox"/> Lend Me Your Ears: Auditory-Verbal Teaching Strategies	\$75	x	_____	=	\$ _____
<input type="checkbox"/> "LSL" Up Your Lesson!	\$75	x	_____	=	\$ _____
<input type="checkbox"/> Supporting Optimal Listening and Learning in Everyday Classrooms	\$75	x	_____	=	\$ _____

### OTHER EVENTS

Saturday, June 26	Price	x	Quantity	=	Total
<input type="checkbox"/> Family Night at the Movies	\$10	x	_____	=	\$ _____
<input type="checkbox"/> Happy Hour in the Tropics	\$15	x	_____	=	\$ _____
<input type="checkbox"/> Club Volta	\$15	x	_____	=	\$ _____

Sunday, June 27	Price	x	Quantity	=	Total
<input type="checkbox"/> LOFT Reunion Lunch	\$20	x	_____	=	\$ _____

## 7. CEU CERTIFICATION FEES

<input type="checkbox"/> AG Bell Academy	\$15	x	_____	=	\$ _____
<input type="checkbox"/> ASHA	\$15	x	_____	=	\$ _____
<input type="checkbox"/> AAA	\$15	x	_____	=	\$ _____
<input type="checkbox"/> Certificate of Learning	\$15	x	_____	=	\$ _____

## 8. PAYMENT

Please enter the total calculated amount from all of the above entries. Fees are payable in U.S. dollars only. Please make checks payable to Alexander Graham Bell Association.

TOTAL AMOUNT ENCLOSED \$ \_\_\_\_\_

Or Charge my:  Visa   
 MasterCard   
 AmericanExpress

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Name as it Appears on the Card \_\_\_\_\_

Billing Street Address \_\_\_\_\_

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

Cardholder's Signature \_\_\_\_\_

**Please email, mail or fax completed registration form with payment to:**  
 AG Bell 2010 Convention  
 P.O. Box 17487 • Baltimore, MD 21297-1487  
 Or book online at [www.agbell2010convention.org](http://www.agbell2010convention.org)  
 Phone: 202-337-5220 or 866-337-5220 • Fax: 202-337-8314  
 Email: [2010convention@agbell.org](mailto:2010convention@agbell.org)  
**All registrations must be received by June 11, 2010.**