

2016 AVRT CONFERENCE REGISTRATION

Fill out this form, print it, and mail with your payment to the address below. If you prefer, you can just print the blank form, fill it out by hand, and then mail it. (Select "Print" from the File Menu in your browser.) Your third option is to pay by PayPal from our website www.avrt.org and send your registration in via email or regular mail.

Name: Linda Fugate

Home or Work Address: 2419 Gordon Smith Dr.

City: Mobile

State: IN **Zip Code:** 36617

Day Phone: 251 478-2192 **Email:** linda.fugate@rehab.alabama.gov

Registration Type (select one, for screen reader users place an X before the registration type):

- | | |
|---|-----------|
| <input checked="" type="checkbox"/> Early Bird Registration before 07/01/16 | \$ 145.00 |
| <input type="checkbox"/> Registration after 07/01/16 | 175.00 |
| <input type="checkbox"/> One Day Registration | 100.00 |
| <input type="checkbox"/> One Day Student Registration* | 80.00 |
| <input type="checkbox"/> Full Student Registration* | 125.00 |
| <input type="checkbox"/> Retired, no longer working in Vision Rehab | 125.00 |
| <input type="checkbox"/> Additional Guest Banquet Meals: \$30 each | _____ |

TOTAL AMOUNT ENCLOSED: \$ _____

(Pay safely with PayPal or by sending a check)

*Student registration must include letter signed by University Supervisor.

PLEASE NOTE: Registration includes a boxed lunch on Monday and the Awards Banquet on Tuesday. One-day registration for Tuesday, August 9th, includes the awards banquet luncheon only. IF YOU ARE BRINGING A GUEST TO THE BANQUET, THEY MUST PAY IN ADVANCE FOR THEIR MEAL AT THE RATE LISTED ABOVE.

Conference Materials in (select one, for screen reader users place an X before the conference material type):

Braille Large Print Regular Print Digital

Vegetarian meals Guide Dog User Assisted Listening Device

Mail Registration Forms To:

Susan Dalton

AVRT

PO Box 676

Marengo, IL 60152

Checks Payable to MACRT-AVRT

If you pay by PayPal

Email form to:

Macrt20@gmail.com