Conference Registration Form

AT & Aug Com 2010 “Breaking Through Barriers”
June 17-18, 2010
The Hotel Roanoke & Conference Center • Roanoke, Virginia

Please print or type—complete a separate form for each participant

Name
Title
School Name
School Division
Address
City State Zip
Daytime Phone No. Fax No.
E-mail
Signature

Registration fee: $89 Full Registration

What is your Teaching Area/Grade Level? 

Disability Descriptions (Check all that apply - if all apply, please check “All Disabilities”).

☐ ADD/ADHD ☐ HI ☐ SD
☐ Autism ☐ ID ☐ SLI
☐ DB ☐ LD ☐ TBI
☐ DDel ☐ MD ☐ VI
☐ Deafness ☐ OHI ☐ All Disabilities
☐ ED ☐ OI

Title (Service Providers) (Only choose one):

☐ Administrator, GE ☐ Parent/Family
☐ Administrator, SE ☐ Physical Therapist
☐ College Student ☐ Pre-K-12 Student
☐ Guidance Counselor ☐ Speech Pathologist
☐ Human Services Agency ☐ Teacher, GE
☐ Occupational Therapist ☐ Teacher, SE
☐ Paraprofessional

☐ Transition Coordinator
☐ University Faculty
☐ Voc. Teacher Admin.
☐ Other Related Provider
☐ Other ____________________
Method of payment: Payment of registration fees is required prior to program attendance. Registration will be processed when payment is received.

☐ Check enclosed (Make payable to: Treasurer, Virginia Tech CE)
☐ Credit Card: ☐ Visa ☐ MC ☐ AmEx

Card No. Exp. Date

Cardholder name

Cardholder signature Date

Return with payment by June 4, 2010 (no staples, tape, or paper clips, please) to:

Conference Registrar
Continuing and Professional Education
Virginia Tech, Mail Code 0272
702 University City Blvd.
Blacksburg, VA 24061

phone: 540/231–5182
fax: 540/231–3306 (for credit card registrations only)

Refund and Cancellation Policy
 Requests for refunds will be honored when received seven calendar days prior to the program. However, another person may be substituted at any time for this program. A $50 administrative fee will be deducted for cancellations. In the unlikely event that this program is cancelled or postponed due to insufficient enrolments or unforeseen circumstances, the university will fully refund registration fees but cannot be held responsible for any other expenses, including cancellation or change charges assessed by airlines, hotels, travel agencies, or other organizations.

For weather or disaster-related program cancellation or postponement information, please call 540-231-9489.

Program Affiliation (Check all that apply):

☐ Adult Ed./Family Literacy    ☐ Head Start    ☐ School Age Spec. Ed.
☐ Early Childhood Spec. Ed    ☐ Homeless    ☐ Title 1
☐ Early Intervention    ☐ Migrant Education    ☐ Other ___
☐ Even Start    ☐ Occupational Child Care
☐ General (or Regular) Ed.    ☐ Preschool Initiative

Please indicate any medically necessary dietary restrictions: ____________________________

*Necessary to process a refund payable to any company, agency or government. The information you provide is subject to the Freedom of Information Act guidelines.