

Registration Form
Convention 2012 ■ June 21 - 24
Rhode Island Convention Center
Providence, Rhode Island



Primary Registrant (name as it will appear on badge) _____ HLA Member ID# (from your *Hearing Loss Magazine* label) _____

Second Registrant (name as it will appear on badge) _____

Company _____

Address _____

City _____ State _____ Zip/Postal Code _____ Country _____

Daytime Phone _____

E-mail *

**For Quick & Secure
 Registration**
Visit us Online:
www.hearingloss.org

HLAA Members Only Full Activity Package (Best Value)

Full Activity Package **includes:**

- Unlimited Entry to the Exhibit Hall during Expo & Session Hours
- All Workshops, Demonstrations, Featured Speakers & Book Signings
- Exhibit Hall Grand Opening and Opening Session
- Get Acquainted Party (GAP)
- Research Symposium, **How the Brain Makes Sense of the World of Sound**
- Exhibit Hall Socials on Friday and Saturday afternoons
- WaterFire on the River (Saturday evening off-site event) – R.S.V.P. on b
- Awards Breakfast (Sunday) – RSVP on back of form
- **Abracadabra** (Friday evening banquet)

Special Dietary Requests: ___ Vegetarian ___ Low Sodium
 ___ Diabetic ___ Gluten Free

	<u>By 5.25.12</u>	<u>On-site</u>
Member	<input type="checkbox"/> \$359	<input type="checkbox"/> \$389
Member Couple	<input type="checkbox"/> \$588	<input type="checkbox"/> \$658
First-Timer*	<input type="checkbox"/> \$329	<input type="checkbox"/> \$359
First-Timer Couple*	<input type="checkbox"/> \$558	<input type="checkbox"/> \$598
Student	<input type="checkbox"/> \$185	<input type="checkbox"/> \$210

***Must be an HLA member who has never attended an HLA convention in the past to qualify for First-Timer discount.**

Education Package

(Does **not** include **Abracadabra** Banquet)

Education Package **includes:**

All events as described under the Full Activity Package above, except this package does **not** include *Abracadabra*, the Friday evening banquet

Not an HLA member? Use the back of this form to join HLA and save on registration fees!

	<u>By 5.25.12</u>	<u>On-site</u>
Member	<input type="checkbox"/> \$299	<input type="checkbox"/> \$339
Member Couple	<input type="checkbox"/> \$479	<input type="checkbox"/> \$519
Non-Member	<input type="checkbox"/> \$359	<input type="checkbox"/> \$389
Student (Non-Member)	<input type="checkbox"/> \$205	<input type="checkbox"/> \$230

Individual One Day Packages

June 22, Friday Daily Package

(Does **not** include **Abracadabra** Banquet)

- Unlimited Entry to the Exhibit Hall during Expo & Session Hours

<input type="checkbox"/> \$175	<u>By 5.25.12</u>	<u>On-site</u>
• All Workshops including Research Symposium, Demonstrations, Featured Speakers & Book Signings	<input type="checkbox"/> \$140	<input type="checkbox"/> \$175
• Exhibit Hall Social		

June 23, Saturday Package

<input type="checkbox"/> \$175	<input type="checkbox"/> \$140	<input type="checkbox"/> \$175
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(Does **not** include **Abracadabra** Banquet)

- Unlimited Entry to the Exhibit Hall during Expo & Session Hours
- All Workshops, Demonstrations, Featured Speakers, & Book Signings
- Exhibit Hall Social

Package Total \$ _____

Additional Individual Tickets

Abracadabra (Friday evening banquet, June 22nd)

(Included in the Full Activity Package)

Special Dietary Requests: Vegetarian Low Sodium
 Diabetic Gluten Free

\$65 x _____

Individual Tickets Total \$ _____

Optional Event Tickets

WaterFire on the River – Saturday, June 23

Complimentary for all registered attendees

RSVP: YES _____ NO _____

The main area is a 10-minute walk; will you need transportation? YES _____ NO _____

Do you use a wheelchair or power chair? YES _____ NO _____

Awards Breakfast – Sunday, June 24

Complimentary for registered attendees of
Full Activity and Education Packages; space is limited

RSVP: YES _____ NO _____

Membership

Individual \$35 Couple/Family \$45

Professional \$60 Student* \$20

*For student membership please enclose copy of student I.D. card

Membership Total \$ _____

Contribution

Contributions help support the education, advocacy, and support efforts of HLAA throughout the year. Donors who contribute to the convention will be listed in the Convention Program if received by April 27, 2012.

Contribution Total \$ _____

Package Total (from front of form) \$ _____

Payment Total \$ _____

Payment Information

Check payable to *Hearing Loss Association of America*

Visa MC AMEX Discover

Card Number

Expiration Date CSC Security Code

Cardholder's Name

Cardholder's Signature

Mail form and payment to:

Hearing Loss Association of America
7910 Woodmont Avenue, Suite 1200
Bethesda, MD 20814

convention@hearingloss.org

phone 301.657.2248 • fax 301.913.9413

*Providing your email address helps us in our effort to "Go Green" and allows us to e-mail convention updates as they occur.

Cancellation Policy

The following policy applies to refunds of registration fees:

Cancellation between April 1 and May 25, 2012 = Refund of 50% of registration fees and event tickets.

No refunds will be made after May 25, 2012. Cancellation must be received in writing. Cancellation date will be determined by USPS postmark or e-mail receipt date.