



MEETING REGISTRATION FORM

NASADHH 2017 Annual General Meeting

June 21, 2017

Salt Palace Convention Center

100 S W Temple,

Salt Lake City, UT 84101

(Please Print)

Name: _____ **Title:** _____

Agency Name: _____

Print Name for Badge: _____

Address: _____

City/State/Zip: _____

Phone: _____ **Fax:** _____ **Email:** _____

Dietary Restrictions: _____ **Special Communication Needs:** _____

Registration Fees	Prior to 4/30/2017	After 4/30/2017
<small>(Registration not accepted after June 9th, 2017)</small>		
_____ NASADHH member	\$100	\$150
_____ Non-member	\$300	\$350
_____ Additional Staff Participant (non-voting)	\$75	\$100

(Included in fee: meals/refreshments, speakers, A/V media, and communication accommodations)

I plan on attend the open house on the 20th of June from 5:30pm- 9pm (see flyer) Yes _____ No _____

_____ Enclosed is check # _____ for \$ _____ payable to NASADHH

_____ Credit Card Type: Visa _____ Master Card _____

Name as it appears on Card: _____

Account # _____ Exp. Date _____ 3-digit CVV# _____

Billing Address and Zip Code: _____

*****Note: Please add credit card charge fee of \$20 to the total amount*****

Please make your check payable to National Association of State Agencies of the Deaf and hard of Hearing and mail the check and the completed form to:

NASADHH
Steven A. Florio, Treasurer
11 Madison Ave
Franklin, MA 02038