

**ASMT's 2009 Fall Conference – September 26, 2009**  
**Successful Transitions for Students with Autism Spectrum Disorders**

**REGISTRATION FORM**  
(Deadline is September 18<sup>th</sup>)

Name: \_\_\_\_\_ Title (for name tag): \_\_\_\_\_  
 Address (Billing Address if using Credit Card): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

I will need ASHA CEUs for attending this conference.

**Select Registration Type**

(Includes breakfast, lunch, snack, and handouts)

|                           | <b>ASMT Members</b>           | <b>Non-members</b>  |
|---------------------------|-------------------------------|---|
| Individual with ASD       | <input type="checkbox"/> \$35 | <input type="checkbox"/> \$35                             |
| Student (with Student ID) | <input type="checkbox"/> \$35 | <input type="checkbox"/> \$35                             |
| ** One Family Member      | <input type="checkbox"/> \$55 | <input type="checkbox"/> \$70                             |
| ** Two Family Members     | <input type="checkbox"/> \$90 | <input type="checkbox"/> \$110 (Include both names above) |
| Professional              | <input type="checkbox"/> \$85 | <input type="checkbox"/> \$120                            |

\*\* Must be a Family Member of an Individual with ASD

**Join ASMT Today to  
Receive the Member Price!**



**Select Membership Category**

- Adult with ASD (16 yrs or older) - Free  
 Student - \$10       Family - \$10  
 Professional - \$25

**Payment**

Registration Fee: \_\_\_\_\_

Membership Fee: (if applicable) \_\_\_\_\_

Late Fee: (if registering after deadline) \$15 \_\_\_\_\_

**Total Payment:** \_\_\_\_\_

Check enclosed (Payable to ASMT)     Visa     MasterCard

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Please send completed form with payment to  
ASMT, 955 Woodland Street, Nashville, TN 37206  
Or fax to 615-383-1176**

If you have any questions or are in need of any  
ADA accommodations, please contact us at  
615-385-2077, ext. 3 or [asmt@tnautism.org](mailto:asmt@tnautism.org).