

REGISTRATION FORM

VPTA's 2009 Annual Conference / Richmond, VA / October 9-11

Name _____

Nickname on Badge _____

APTA Membership # _____

Address/City/State/Zip _____

Phone (Work) _____ (Home) _____

Fax _____

E-mail (Required) _____

PT PTA SPT SPTA

First VPTA Conference? Yes

New VPTA Member? Yes (Join date Oct 1, 2008-present)

I have special needs & may require accommodation in order to fully participate in this meeting.

I have special dietary needs (please specify): _____

I WILL BE ATTENDING

STUDENT CONCLAVE (Friday Only)

FRIDAY SESSIONS

(6 Type I CE hours plus 1.00 hour for attending research presentations)

- Track I
 Track II
 Track III

SATURDAY/SUNDAY SESSIONS

(10.75 Type I CE hours)

- Track IV
 Track V
 Track VI

SATURDAY

- Business Lunch (check here if attending)
Lunch is included with PT/PTA Full & Sat/Sun registration fees only.
- Casino Night & Live Auction
Fees included with PT/PTA Full & Sat/Sun registration fees only.

REGISTRATION FEES	9/11	9/25	after 9/25		
	Early Bird	Advance	Onsite	Friday Only	Sat/Sun
PT Member	\$345	\$425	\$475	\$215	\$310
PTA Member	\$250	\$315	\$365	\$165	\$230
PT Nonmember	\$495	\$595	\$665	\$325	\$460
PTA Nonmember	\$340	\$440	\$500	\$210	\$320
Student Member	\$140	\$180	\$205	\$75	\$135
Student Nonmember	\$180	\$220	\$250	\$110	\$175
Student Conclave (Friday, October 9)	Student Member: \$45 Student Nonmember: \$65				

	Number x Cost	Total
Registration Fee		\$
Fri 10/9 - VPTA-PAC Event	\$35	
Sat 10/10 - Additional Business Lunch Tickets	# _____ x \$30 (Each) # _____ x \$20 (Students)	\$
Sat 10/10 - Casino/ Live Auction	PT/PTA Full & Sat/Sun: Included Friday-only attendees, Guests, & Students: \$40	\$
TOTAL AMOUNT ENCLOSED		\$

VPTA-PAC Event	\$35
Business Lunch	PT/PTA Full & Sat/Sun: Included Friday-only attendees & Guests: \$30 / Students: \$20
Casino Night/Live Auction	PT/PTA Full & Sat/Sun: Included Friday-only attendees, Guests, & Students: \$40

Please return your completed registration form and payment to:

Virginia Physical Therapy Association
 PO Box 327, Alexandria, VA 22313-0327

OR FAX your registration and payment (credit card only) to:
 VPTA 703/706-8575

Allow 2 weeks for processing. Advance registration deadline is **September 25**. Full conference fees apply after that date.

Cancellations: A refund, less \$50 administrative costs, will be issued for written requests postmarked by October 1. No refunds permitted after October 1, 2009.

METHOD OF PAYMENT:

- Check (Make checks payable to Virginia Physical Therapy Association)
 Credit Card: Please charge my MasterCard Visa American Express

Card # _____ Exp. date _____

Name on card _____ Zip Code of Billing Address _____

Authorized Signature _____

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VPTA'S ANNUAL CONFERENCE

OCTOBER 9-11, 2009