ATTENDEE REGISTRATION
Please print clearly or type (this form may be copied for additional registrants.)

First Name: ___________________________  Last Name: ___________________________

Badge Nickname: ______________________  Position/Title: __________________________

Company Name: ______________________________________________________________

Address: ______________________________________________________________________

City/State/Zip Code/Country: _____________________________________________________

Phone: ___________________________  Fax: ___________________________  Email: ___________

Virtual Event Marketing Opt Out: As part of the ATIA 2023 Virtual Event, ATIA will be sharing basic attendee data with our members companies who have sponsored activities. Please indicate if you would like to withhold your information from sharing with our members. We will be sharing the following data: Name, title, workplace, email, and interest areas.

      I opt out of ATIA sharing my data
ATTENDEE PROFILE

1. Please indicate your attendee category (select all that apply):

(A) Accessibility Professional
(B) Advocate
(C) AT Dealer
(D) AT Specialist
(E) Consultant
(F) Consumer
(G) Education Administrator
(H) Federal Government
(I) Hard of Hearing/Deaf Specialist
(J) Higher Education
(K) Individual with disability
(L) K-12 Educator
(M) Occupational Therapist
(N) Parent
(O) Physical Therapist
(P) Rehabilitation Counselor/Specialist
(Q) Speech Language Pathologist
(R) Special Education Director
(S) Teacher of the Visually Impaired
(T) Transition Coordinator
(U) University Affiliate
(V) Vision Specialist
(W) Other (please specify)

2. Please indicate what most closely describes your role in purchasing decisions in your organization:

(A) I am the purchasing decision-maker
(B) I approve purchases
(C) I recommend/influence purchasing decisions
(D) I am not involved in purchasing decisions

3. Have you previously attended an in-person ATIA Conference?

If yes, please indicate the number of years you have attended an ATIA Conference:

(A) 1 year (B) 2-5 years
(C) More than 5 years (D) More than 10 years

4. Did you attend the 2022 ATIA Virtual Event?

(A) Yes (B) No

5. Please indicate your interest area(s) (select all that apply):

(A) AAC (Augmentative & Alternative Communication)
(B) Accessibility
(C) Blind/Low Vision
(D) Deaf/Hard of Hearing
(E) Education & Learning
(F) Higher Education
(G) Physical Access/Mobility
(H) Transition/Workplace
(I) Other (please specify)

6. Do you have an ASHA membership number? If yes, please enter it here. Please note you must enter your ASHA membership number to obtain ASHA CEUs for approved courses.
Registration Categories / Fees
Please identify the fees in the proper tier associated with your registration category and include the total below.

<table>
<thead>
<tr>
<th>Registration Categories / Fees</th>
<th>Early Bird 8/1/22 – 12/9/22</th>
<th>Regular 12/10/22 – 4/30/23</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virtual Event Registration (Includes all CEUs; no additional payment necessary)</td>
<td>$425.00</td>
<td>$475.00</td>
</tr>
<tr>
<td>Parent Virtual Event Registration: $75 off each registration (Includes all CEUs; no additional payment necessary. A letter describing your child’s disability must accompany your registration. A letter can be submitted with your registration form.)</td>
<td>$350.00</td>
<td>$400.00</td>
</tr>
<tr>
<td>Group Registration (5+ Attendees)</td>
<td>$350.00</td>
<td>$400.00</td>
</tr>
</tbody>
</table>

5 WAYS TO REGISTER
ONLINE: https://www.atia.org/atia-2023-registration/  
EMAIL: registration@atia.org  
MAIL: ATIA Registration, 8324 Solutions Center, Chicago, IL 60677-8003

PAYMENT INFORMATION: Full payment must accompany registrations.

ATIA Federal ID#: 77-0482095

Check (payable to ATIA)  
MC  Visa  AMEX  
Purchase Order (Original PO must accompany registration)

Total Fees Due: $ ___________________________  
Discount Code (if applicable): __________________

Check/Card/PO# ___________________________  
Exp Date ___________  
CVV Code ____________

Name on card (please print) ____________________________________________

Signature: ____________________________________________________________________

PURCHASE ORDER BILLING INFORMATION
If you are paying with a purchase order, please provide billing contact information.

Billing Contact Name: __________________________________________________________________

Billing Contact Phone Number: __________________________________________________________________

Billing Contact Email Address: __________________________________________________________________

If you submit this form via fax, email, online, or mail, you are agreeing to the applicable policies outlined below.

Cancellation Policy: A full refund will be granted to cancellations made in writing on or before Friday, October 28, 2022. Name changes and substitutions are allowed at no fee. Regrettably, no refunds will be given on cancellations received on or after Saturday, October 29, 2022. Phone cancellations will not be accepted. Written cancellations must be sent by email to registration@atia.org or faced to +1 847-277-7414. ATIA reserves the right to make changes to all policies.

Virtual Event Refund/Transfer Policy: ATIA may permit a transfer from an ATIA 2023 virtual event registration to an ATIA 2023 in-person registration under the following conditions:
1. Please note per our cancellation policy, no refunds will be given after October 29, 2022, including partial refunds.
2. If you’d like to request a transfer, please contact us as soon as possible. You must email to registration@atia.org by Monday, January 23, 2023, with your request.
3. Any fee differences between what was paid, and the new registration must be paid immediately by credit card. We will not accept purchase orders for registration changes.
4. You will receive an updated email confirmation once the request has been processed; please allow up to three days for processing.

**Purchase Order Payment Policy:** If your organization is required to submit a purchase order for payment, please send your purchase order document with all pages of the registration form. Registrations paid by purchase order are subject to the Cancellation Policy. Purchase order payments are due no later than 30 days after the completion of the conference, by Monday, March 6, 2023. Payments received after March 6, 2023, will incur a $75 late payment fee.

**Please Note:**
I understand that by registering and participating in ATIA and its events, activities, programs and other functions, I agree that ATIA shall not be held responsible for any claims, demands, actions, judgments, costs, and expenses, including costs of defense thereof, incurred by me, my employees, guests or clients, which arise due to any products and/or services delivered or otherwise provided to me, my employees, guests or clients.

ATIA may use personal identifiable information collected, such as to help minimize any potential hotel attrition penalties for the association and by registering for the conference you consent to such use. If you have any questions or concerns please contact ATIA at registration@atia.org.