

NKY TBI Conference Registration Form

(Please complete a registration form for each person attending)

Name _____

Title _____

Discipline _____

Organization _____

License No. _____

Address _____

City _____

State _____

Zip _____

Daytime Phone _____

E-mail _____

Registration Fee (includes Meals/Snacks):

- Brain Injury Survivor \$25.00 (non CEU/CLE)
- Military / Veteran FREE (non CEU/CEU)
- Family Member \$25.00 (non CEU/CLE)
- General \$25.00 (non CEU/CLE)
- Professional \$90.00 (CEU/CLE)

- I am a Brain Injury Survivor or Family Member.
Please consider me for a scholarship. *(Limited)*

Speaker Presentation Handouts (Select 1):

- GO GREEN* - access from conference website
- Paper handouts

Special Needs:

Payment : _____

Please make check payable to: BRIDGES Inc.

Mail registration and check to:

Sutton Rankin Law, PLC

Attn: Julie Fronk

130 Dudley Road, Ste 250, Edgewood, KY 41017

Or, pay by credit card:

Card # _____

Name (AS APPEARS ON CARD; PLEASE PRINT CLEARLY) _____

Expiration Date (Mo/Yr) _____

Security Code _____

Zip Code _____

Signature _____

Fax credit card registrations to: 859-341-2777

or email to: jfronk@suttonrankinlaw.com

(BRIDGES Tax ID: 26-2633630)

Registration deadline: March 20, 2012