



**2020**  
AG BELL GLOBAL VIRTUAL  
**LISTENING AND  
SPOKEN LANGUAGE**  
SYMPOSIUM

# REGISTRATION FORM

Name: \_\_\_\_\_  
Dr./Mr./Mrs./Ms. First Name Last Name Nickname (for badge)

Company/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email (required for access to virtual conference): \_\_\_\_\_

The official languages of the Virtual Symposium are English and Spanish. Sessions will be captioned in English and Spanish. Communication access through other languages (via captioning) may be available upon request to [2020symposium@agbell.org](mailto:2020symposium@agbell.org) no later than July 1.

**WHAT IS YOUR PROFESSIONAL TYPE?** (Check all that apply)

- Audiologist  Certified LSLS  Educator of the Deaf  Physician  School Administrator  Speech-Language Pathologist  General Education Teacher  Early Interventionist  General Special Education Teacher  Mental Health Professional  Professor/Researcher  Other \_\_\_\_\_

**CEUS**

No additional charge. This section must be completed to receive CEUs. Check all that apply. Certificates of attendance will not be provided. Please check Certificate of Learning if you need confirmation of your attendance. Note: Only professional registrants are eligible to receive CEU credits.

- AG Bell Academy  AAA  ASHA  Certificate of Learning

**REGISTRATION FEES**

**Until July 1st:** Professionals – \$199 | Students\*, Friends & Family – \$99  
**After July 1st:** Professionals – \$249 | Students\*, Friends & Family – \$149

\*Students must submit a copy of an official school document to [2020symposium@agbell.org](mailto:2020symposium@agbell.org) that proves their student status.

**PAYMENT METHOD** (Check one)

- VISA  MASTERCARD  AMERICAN EXPRESS  DISCOVER  
 Check or Money Order (Made payable to Alexander Graham Bell Association)

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CSC Security Code: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Signature: \_\_\_\_\_

**PAYMENT (U.S. Dollars only):** \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED:** \_\_\_\_\_

**CANCELLATION POLICY**

For cancellations received on or prior to July 1, 2020, registration fees will be reimbursed minus a 25% administrative fee. No refunds will be issued after July 1, 2020. Please send cancellation notification to: [2020symposium@agbell.org](mailto:2020symposium@agbell.org).

**Mail, email or fax completed form to:**

2020 Listening and Spoken Language Symposium Registration  
 CL 500055  
 P.O. Box 5007  
 Merrifield, VA 22116-5007  
 Fax: 202-337-8314  
 Email: [2020symposium@agbell.org](mailto:2020symposium@agbell.org)

**NOTE:**

If you are sending your forms by fax, PLEASE DO NOT MAIL ORIGINALS OR REGISTER ONLINE. You may be charged a cancellation fee to refund a duplicate registration.