

## 2010 ADA Convention: Registration Form

ADA Headquarters  
1020 Monarch Street, Suite 300B  
Lexington, KY 40513  
Toll Free: 866-493-5544  
Fax: 859-977-7441



*Attendee Information: Complete and return one form for each regular attendee.*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company/Organization: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Country: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Registration Fees (All prices are in US dollars)

- |   |                                |  |                                |
|---|--------------------------------|--|--------------------------------|
| <input type="checkbox"/> ADA Member         | <input type="checkbox"/> \$495 | <input type="checkbox"/> Student Member <sup>2</sup>     | <input type="checkbox"/> \$270 |
| <input type="checkbox"/> Non-Member         | <input type="checkbox"/> \$650 | <input type="checkbox"/> Student Non-Member <sup>2</sup> | <input type="checkbox"/> \$295 |
| <input type="checkbox"/> Guest <sup>1</sup> | <input type="checkbox"/> \$295 |  |                                |

<sup>1</sup>**Note:** Guest registration includes all meals and social events provided to regular attendees, plus an exhibit hall pass.

<sup>2</sup>**Note:** Students must submit a copy of their student ID card with their registration to be eligible for the student rate.

Receive 10% off  
when you register  
today!

**Total Registration Fee:** \$ \_\_\_\_\_

- American Express     MasterCard     Visa     Check (payable to ADA, drawn in US dollars)

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

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

Please indicate if, under the Americans with Disabilities Act, you require specific aids or devices to fully participate in this conference.

Yes \_\_\_\_\_