



Registration Form - BIAOR Annual Conference 2003 1st Annual Pacific Northwest Regional Brain Injury Conference Pulling It All Together / Realm of the Senses

Please register not later than September 15, 2003 to receive discount, assure admittance and facilitate check-in.

*(Note: A separate registration form is needed for each person attending.
Please make extra copies of the form as needed for other attendees.)*

First Name _____	Last Name _____
Badge Name _____	Affiliation/Company _____
Address _____	City _____ State _____ Zip _____
Phone _____	Fax _____ Email _____
Special Needs _____	

Please check all that apply:

- I am interested in volunteering at the conference. Please call me.
- I am requesting continuing education credits (CEU's and CME's) for the conference.
- I would like to make a donation to cover costs of survivors unable to pay (see below).
- Call me about sponsorship/exhibitor opportunities.

Conference Registration Fees: Registration fees include: continental breakfast and dinner on Friday; lunch on Friday and Saturday; all conference related materials; continuing medical/educational units; and access to all conference sessions, exhibits, posters and roundtables.

	BIAOR Member ¹	Non-Member	Accompanying Person ²	Amount
___ 2 Day Conference Advance- ___ After September 15	\$225 \$250	\$275 \$300	\$130 \$155	\$
___ Friday Only Advance- ___ After September 15	\$175 \$200	\$200 \$225	\$80 \$105	\$
___ Saturday Only Courtesy³ Advance ___ Courtesy ³ After September 15	\$20 \$25	\$30 \$35		\$
___ Saturday Only Survivor/Family Advance- ___ Survivor/Family After September 15	\$50 \$75	\$75 \$95		\$
___ Saturday Only Professional Advance- ___ Professional After September 15	\$125 \$150	\$150 \$175		\$

1) A limited number of conference scholarships are available to survivor members of BIAOR to cover the costs of conference registration. Transportation from Portland and Salem to and from the conference is also available to survivor members on a limited basis. For more information, contact the BIAOR office.

2) **Accompanying Person:** Registration fee includes continental breakfast, dinner on Friday, lunches and exhibition only. Fee does not include admission to conference sessions.

3) Courtesy rate is for brain injury survivors with limited means.

I want to become a BIAOR member NOW to receive the discounted registration fee:

- Basic-\$35
 Family-up to 3 people-\$50
 Survivor Courtesy³-\$5
 Professional-\$50
 Sustaining-\$100
 Corporation-\$200
 Sponsorship Bronze-\$250
 Sponsorship Silver-\$500
 Sponsorship Gold-\$1000
 Sponsorship Platinum-\$2000

Scholarship Contribution _____ (donation to assist in covering the cost of survivors with limited funds)

Registration and Membership

Total \$ _____

(Please add totals from Registration Fee, Membership Fee and Scholarship Contribution for final total costs)

Please turn over
Registration continued

Conference 2003 Registration Continued

Payment

Payment in full must accompany your registration. Payment may be made by check or money order, PayPal (see directions below), VISA , Discover, or MasterCard.

Enclosed please find my check/ money order payable to BIAOR in the amount of \$ _____.

Please charge to my credit card (\$35 minimum):

Visa MasterCard Discover *Total Charged to Credit Card* \$ _____

Card Number: _____ Expiration Date _____

Print name as it appears on card: _____ Signature of Cardholder: _____

PayPal (the internet bank) has been activated to receive credit card payments. To use this service, log onto www.PayPal.com and follow these simple steps:

- Set up your FREE, SECURE personal PayPal Account
- Click on Send Money and follow instructions
- At email address, enter: biaor@biaoregon.org
- Verify transaction
- Watch for email confirmation
- For assistance, call Sherry Stock 503-740-3155
- Continuing Medical Credits and Continuing Education Credits will be available at the conference

Confirmation and Cancellation Policies

Confirmation letters will be e-mailed within five business days of receipt of registration. If your confirmation is not received within 2 weeks, please contact us via e-mail at biaor@biaoregon.org or by telephone at +1-800-544-5243 or 503-413-7707, M-F, 9-5.

Cancellations must be received in writing by September 26, 2003 to qualify for a refund. A \$25.00 administrative fee will be deducted. Substitutions are always welcomed and no-shows will be billed.

Registration, Payment, and Refund Policy

Please submit payment with completed registration form.

Fees are payable by check, credit card, or state government purchase orders which obligate payment.

All payments must be received by September 15, 2003, to be eligible for discount.

All cancellations are subject to a \$25 processing fee.

No refunds will be issued for cancellations received after September 26; however, registrations are transferable.

Mail registration forms and payments to:

2003 Conference
Brain Injury Association of Oregon
2145 NW Overton
Portland OR 97210-2924

Or Fax to: (503) 413-6849