



# American Nystagmus Network

## Conference Registration Form Saturday Only (8:00am – 6:00pm) July 18, 2009 Pittsburgh PA

Please print this form, complete it, and attach a check or money order in U.S. currency payable to "American Nystagmus Network, Inc.". **Please do not send cash.** Cash or check accepted at the door.

**American Nystagmus Network, Inc.**  
**Christine Smith**  
**20 Letchworth Lane**  
**Avondale, PA 19311**  
**Attn: Conference Registration**

**(Please print)**

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country (if applicable): \_\_\_\_\_  
Phone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please indicate by category the number of people who will attend:

\_\_\_\_\_ Adult(s) w/N, Name(s): \_\_\_\_\_  
\_\_\_\_\_ Teen(s) w/N, Name(s): \_\_\_\_\_  
\_\_\_\_\_ Parent(s) of child w/N, Names: \_\_\_\_\_  
\_\_\_\_\_ Child(ren) Names and Age(s): \_\_\_\_\_  
\_\_\_\_\_ Other Name(s): \_\_\_\_\_

**Conference Fees:** Ages 12 and under classified as children. Adults include any family member over the age of 12 attending with the member. Fees include reception, group meals, presentations, and daycare for children during Saturday presentations (Hotel Not Included). Form with payment must be postmarked by specified dates to receive early registration discounts.

|                           |                                     |          |
|---------------------------|-------------------------------------|----------|
| ANN Member                | _____ First Adult \$150 =           | \$ _____ |
|                           | _____ Additional adults x 125 each  | \$ _____ |
| Non-ANN Member(s)         | _____ (no. of persons) x \$200 each | \$ _____ |
|                           | Includes 2009 membership            |          |
| Child(ren) (UNDER AGE 12) | _____ (no. of persons) x \$65 =     | \$ _____ |
| Total People              | _____ Total =                       | \$ _____ |

**EARLY REGISTRATION DISCOUNT**

Before June 1, subtract \$25 per person, \$15 per child  
Subtract this amount from above total)

|                                      |                |                 |
|--------------------------------------|----------------|-----------------|
| Total number of adult(s)             | _____ x \$25 = | \$ _____        |
| Total number of child(ren)           | _____ x \$15 = | \$ _____        |
| <b>Final Total (after discounts)</b> | <b>=</b>       | <b>\$ _____</b> |

**Walk up registrations - Add \$25**

**Please Note: Registration postmarked after July 1 limited to remaining space available  
Mail-in Registrations must be received by July 10, 2009, otherwise register at the conference.  
Cancellations postmarked by July 1 may be refunded minus a \$25 fee. No refunds after July 1.**

We will be compiling a list of conference attendees' contact information to be distributed with registration packets. Inclusion on this list is optional for the conference attendee. If you wish to be included, please put an asterisk next to any information **want** to be printed on the list.

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ANN will be sponsoring a trip to The Pittsburgh Pirates game Saturday night. The game starts at 7:05pm and the stadium is a short walk across the river directly opposite the hotel. Each ticket holder will receive a free cap. Ticket must be purchased in advance. The seats should be behind home plate about 1/3 of the way up. There will be fireworks after the game.

Tickets are \$20 each payable with registration while supply lasts \_\_\_\_\_.

I would like to order \_\_\_\_\_ tickets @ \$20 each = \_\_\_\_\_.

Tickets are **non-refundable**, but may be sold to other conference attendees by the purchaser.

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We are also going to be sponsoring a tour of Dr. Hertle's new facility after 4pm on Saturday. ANN will provide free shuttle service. ANN plans at least 2 round trips. While not a commitment, we would like to get an idea of how many people are interested.

Please indicate the number of people from your group who will be interested in the tour: \_\_\_\_\_