

CONFERENCE REGISTRATION FORM

**Innovations in School-Based Physical Therapy Practice 2018
 July 27-28, 2018 (Friday-Saturday)**

University of Washington; Seattle, Washington

Registration Deadline: June 30, 2018 (or until maximum attendance is reached)

Name/Credentials: _____

APTA Membership Number: _____ Nickname for Badge _____

*Address: _____

Daytime Phone: _____ E-mail: _____

Agency Name (if applicable): _____

*If a PT in the state of Illinois wishes to apply an Academy of Pediatric Physical Therapy course to their state EI credentialing certificate, please notify the Academy at pediatrics@apta.org at least 8 weeks prior to the course taking place, to allow time to submit a course approval application.

| Member Type | Advance (Ends June 30) | Advance Daily (Ends June 30) | Onsite (Begins July 27 if space-available) | Onsite Daily (Begins July 27 if space- available) |
|---------------------------------------------------------|---------------------------|---------------------------------|-----------------------------------------------|---------------------------------------------------------|
| **Academy of Pediatric Physical Therapy APTA Members | \$275 | \$200 | \$400 | \$250 |
| Non-Academy APTA Members | \$325 | \$225 | \$425 | \$275 |
| Non-APTA Members | \$425 | \$325 | \$525 | \$375 |
| Group Rate (3 or more from same facility/system) | \$250 | Not available | Not available | Not available |

**To join the Academy of Pediatric Physical Therapy, visit www.apta.org and click on "Join" at the top of the page. Member registration rate applies, with transaction record. (If you are not eligible for Academy membership but would like to become an Academy Partner, visit www.pediatricapta.org and click on "Join Us" and then "Partners Program;" member discount applies.)

If attending for a single day, please circle which day you will attend: **July 27** **July 28**

_____ I DO NOT permit sharing of my name and e-mail address with other course attendees.

Choose one (you can change your mind – this is strictly for space-planning purposes):

I plan to attend _____ Track 1 OR _____ Track 2 on Friday, July 27

Payment: You can register online with a credit card at www.pediatricapta.org under Quick Links/Professional Development or by phone by calling the Component Registrar at 800/999-2782 ext 3155, or you can mail this registration form with your check to:

**Academy of Pediatric Physical Therapy, APTA
 Attn: Component Registrar, Innovations in School-Based PT Practice
 1055 North Fairfax St, Suite 205
 Alexandria, VA 22314-1488**

Checks should be made payable to: **Academy of Pediatric Physical Therapy, APTA**. This registration form must be received with payment in full and must be postmarked by **June 30, 2018**.

Refund Policy: The Academy reserves the right to cancel this event, in which case all monies paid will be reimbursed. If you need to cancel your registration, please send a request in writing to the above address by July 6, and allow 4 weeks for reimbursement (minus a \$100 processing fee). No refunds will be allowed after this date.

**NOTE: Attendance for this course is limited and will be handled on a first-come, first-served basis.
 Conference handouts will be posted a week or so before the conference; no handouts will be available onsite.**