

**Registration for
Perspectives on Autism February 19, 2010
Children who Challenge on February 18, 2010
REGISTRATION LIMITED**

GO TO www.familiestogether.org to register and pay online.

OR YOU CAN COMPLETE AND MAIL/FAX THIS FORM OR SEND THIS INFORMATION BY EMAIL.

FTPD - Cindi Clark
4417 Great Oak Road
Rockville MD 20853

PHONE IN REGISTRATION 1-866-326-4864
FAX: 1-509-335-7339

NAME: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

PHONE: _____ Email: _____

All attendees must register and will receive an email confirmation. Refunds under most circumstances are not allowed. Substitutions are always allowed. Please remind your substitute to bring the confirmation letter. Donation registrations for parent scholarships are always appreciated. Please call 1-866-326-4864 if you do not receive a confirmation notice or you have any other questions. CEUs will be available for an additional charge.

Please check the amount you are paying.

FAMILY IS IMPORTANT

_____ \$65.00 – Teacher and direct service providers registration

_____ \$75.00 – General Registration

_____ \$20.00 with Parent Scholarship – you must call and be approved for this rate. Limited number available!

_____ \$16.00 -- for 8 CEUs for Feb 19

COMPANION WORKSHOP ON BEHAVIOR

_____ \$60.00 Companion Workshop on Behavior

_____ \$14.00 for 7 CEUS for Feb 18

Total Paid _____

How are you paying?

_____ I am paying by check. Make checks payable to FTPD

_____ I am paying the registration fee using a credit card.

1. Go online at our website www.familiestogether.org and click on "Register Now."

2. or complete information below and fax this form to : 509-335-7339

Charge my: (circle one) Master Card Visa. (American Express can only be used online)

Account No. _____ Exp. Date _____

Name: _____ Security Code on back of card _____

Address: _____

**If paying by credit card, please use name and address to which your credit card bill is mailed.