

Registration Form - DEADLINE: AUGUST 1, 2006

All cancellation requests must be made in writing. Cancellations are subject to a \$10 administration fee. We regret that refunds cannot be offered for "no shows" or for cancellations received after August 1st. You may send a substitute in your place if you are unable to come.

Each person, including staff and individual PCA's (Personal Care Attendant), planning to attend the conference, must complete a separate registration form and mail it in with their payment either by check or money order.

Please Print

Name _____

- I am a self-advocate
- I am staff accompanying self-advocates
- I am a family member
- I am a PCA for a person

Address _____

City/State/Zip _____

Daytime telephone number with area code _____

E-Mail _____

Agency affiliation, if applicable _____

Agency contact person & phone number _____

Agency address _____

County _____

Scholarships

A limited number of scholarships are available on a first-come, first-served basis to individuals or households with dependents receiving Indiana SSI, SSDI or TANF.

The scholarships are for the conference registration fee that includes all four meals. The scholarships do **not** apply to the overnight hotel rooms. Applicants requesting a scholarship must send a \$10 check or money order with their registration form. Checks will be returned if the scholarship cannot be granted.

- I am requesting a scholarship; enclosed is my \$10 check or money order

Special Accommodations

If you are requesting any of the following accommodations, your registration form and payment must be received by August 1, 2006. Special accommodations for late registrations can not be guaranteed.

- I need a sign language interpreter
- I need wheelchair access
- I have a service animal(s)
- I need large-print or Braille (tell us which) _____
- I have special dietary needs (please explain) _____
- Other special needs: (please explain) _____

Fees and payment information

Self-advocates, staff & individual PCA's: Conference fee is \$85 per person.

Make checks out to: Self-Advocates of Indiana, Inc.

Mail to: Conference, Center on Aging and Community
Indiana Institute on Disability and Community
2853 E. 10th St., Bloomington, IN 47408

Families: conference fees are as follows:

1. A family member who will attend the whole conference with their self-advocate:
\$85 per person.
2. A family member who will attend Thursday evening only: \$15 (dinner provided)
3. A family member who will attend Friday only: \$60 (breakfast & lunch provided)
4. A family member who will attend both Thursday evening & Friday all day: \$75
(Thursday dinner, Friday breakfast & lunch)

For more information, contact

Maribeth Mooney
Center on Aging and Community
Indiana Institute on Disability and Community
2853 E. 10th St., Bloomington, IN 47408

Phone: 1-800-825-4733 (Indiana Only); 812-856-5543

E-Mail: For Maribeth – MFMOONEY@exchange.ucsf.indiana.edu

Web: <http://www.iidc.indiana.edu/cac/>