



#2021TASHCONF

DECEMBER 2-4

TASH

CONFERENCE

NEW ORLEANS, LA

CONFERENCE REGISTRATION FORM

Attendee Information (one form per attendee)

Name: _____ Organization (if applicable): _____

Address: _____ City/State/ZIP: _____

Country: _____ Phone: _____ Email: _____ Name on Badge: _____

Age: Under 18

18-24

25-44

45-64

65 and older

Prefer not to disclose

Gender: Male

Female

Non-Binary

Other

Prefer not to disclose

Which Best Describes You?: Adult Service Provider

Student

Corporation/For Profit Professional

Government/Public Policy Professional

Not-for-Profit Professional

Professor/Researcher

Special/General Education Professional

Self-Advocate

Family Member

Retired

Other

Questions about large group registrations? Email register@tash.org or call (202) 817-3264

Accommodations

Attendees, who need accommodations (e.g. CART, interpreters), please complete the section below. For planning purposes, TASH needs to know what accommodations are needed in order to secure appropriate providers by early-November.

American Sign Language (ASL)

CART

Large Font

Other: Please explain: _____

None

Lunches

TASH's Let's Connect mini-luncheons will take place on Friday, December 3. Boxed lunches are available for purchase for \$30 per person). You are welcome to join and bring your own lunch. The Membership Luncheon & Awards Ceremony (complimentary to all current TASH members) will be held on Saturday, December 4. Please check the boxes below if you plan to attend either lunch-time events.

Let's Connect Mini-luncheons **Please select group:*

Membership Luncheon & Awards Ceremony

Dietary Restrictions? _____

Example: Vegan, Gluten Free, Allergies, etc.

Communication Access Community Living

Diversity & Social Impact Employment

Families & Siblings Inclusive Education

Self-Advocates

Media Release

By registering for the 2021 TASH Conference, I am agreeing to allow TASH to use my likeness for marketing purposes. This includes my name, photograph, video and my voice in all forms and media in all manners for non-profit, public purposes. I waive the right to inspect or approve the finished products.

I have read the terms and conditions, and I agree.

TASH Membership

Signing up for a TASH membership today will save you money on your conference registration and provide you with member benefits for a full year! To learn more, please visit our website: www.TASH.org/join. To add a membership to this order, please include the appropriate amount in the "Membership Total" section below.

2021 Conference Ticket Pricing	Early-Bird Rate (through Oct. 1)		Regular Rate (Oct. 2 – Dec. 4)	
	Member	Non-Member	Member	Non-Member
Professional, Associate, Organizational, Lifetime	\$450	\$645	\$495	\$690
Student	\$275	\$340	\$320	\$385
Family Member, Direct Support Professional, Retiree	\$250	\$305	\$295	\$350
Self-advocate	\$200	\$255	\$245	\$300

Personal Assistant	\$150
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One Day Pass	Member	Non-Member
	\$300	\$400

Registration Policies

Registration will not be accepted without full payment online or by check, credit card, or official purchase order. All checks must be made in US dollars made payable to TASH, and payment in full is required prior to the event's start date.

Personal Assistant: This allows the primary attendee to bring a personal assistant for \$150 each. A separate registration form is required.

One Day Pass: A One Day Pass may be used on December 2, December 3, or December 4.

Attendee Selection

Professional, Associate, Organizational, Lifetime:
This rate is for people working in the disability field in a professional capacity and those in their early careers.

Cancellations/Substitutions

All cancellations must be requested in writing on or before Monday, November 8, 2021, to receive a refund less 15% service charge. No refunds will be granted after Monday, November 8, 2021. All requests for refunds should state the registrant's name and the amount of payment. We regret that we cannot offer refunds for "no shows" at the conference. Substitutes are welcome at any time. Substituted registrants that fit into a different registration category will be responsible for payment of the difference in conference registration fees.

Student: Please provide your current student ID # to receive this rate. _____

Registrations **may not** be shared for any reason.

Family, Direct Support Professionals, Retired:
This rate is reserved for family members, direct support professionals and retired individuals who are not working in the field as professionals.

Self-Advocate: This rate may be used by self-advocates only.

Total Payment

Conference Registration Total: \$ _____
 Personal Assistant Total: \$ _____
 Boxed Lunch (\$30/each): \$ _____
 Membership Total (if applicable): \$ _____
 Donation Total (if applicable): \$ _____

Total Amount: \$ _____

Billing Information

Name on Card: _____ Credit Card #: _____

Address: _____ City/State/ZIP: _____

Country: _____ Expiration: _____ CVV: _____ Authorized Signature: _____

Credit Card Type: AMEX Mastercard VISA Discover Check Enclosed Purchase Order
 (made payable to TASH) P.O. # _____

Submit this form via email at: register@tash.org, fax to (202) 999-4722, or mail to TASH at
 1101 15th Street NW, Suite 206, Washington, DC 20005