## **2019 Conference Registration**



Please select all that apply:

<b>Registration Type:</b> Please note that rates increase on March 1, 2019. The registration deadline is 6:00 p.m. March 18, 2019.		
Gen	eral:	
	Friday only: \$140 (\$160 after 2/28/19) Saturday only: \$140 (\$160 after 2/28/19) Both days: \$250 (\$270 after 2/28/19)	
Indiv	vidual with ASD:	
	Friday only: \$90 (\$110 after 2/28/19) Saturday only: \$90 (\$110 after 2/28/19) Both days: \$150 (\$170 after 2/28/19)	
Prof	essional:	
	Friday only: \$165 (\$185 after 2/28/19) Saturday only: \$165 (\$185 after 2/28/19) Both days: \$275 (\$295 after 2/28/19)	
	CEU credits: \$35 single day CEU credits: \$50 both days	
If you	urday workshop preference:  are attending the conference on Saturday, ate your preferred topics for each time slot.	
Morning Concurrent Sessions:		
	<b>Navigating Adult Options</b>	
	Let's Play!	
Afternoon Concurrent Sessions:		
	Gut Issues in Autism 2019	
	Relationships & Resilience	
Food Preference: (buffet style, includes GF foods)		
(	Vegetarian meal	
	Non-vegetarian meal	
	Special diet/food allergy	
Tota	<b>al:</b> \$	

Name (first, last):			
Email (required):			
	State: Zip:		
	Phone (c):		
Employer (optional):			
Payment Type			
Check (make checks payable to ASNC) Check Number:			
Credit Card			
☐ MasterCard ☐ American Express	☐ Visa ☐ Discover		
Credit Card Number:			
Expiration Date:	Security Code:		
Cardholder Name:			
Signature:			

## Mail registration form and payment to:

Autism Society of North Carolina 2019 Conference Registration 5121 Kingdom Way, Suite 100 Raleigh, NC 27607

Fax: 919-882-8661

School/organization purchase order instructions: To reserve your spot and be invoiced, complete this form and forward to your school or district accounting department. They can then forward a purchase-order request or check to the address at the bottom of the page.

Innovations Waiver instructions: Medicaid Innovations Waiver recipients and their natural supports system (family, caregivers, etc.) are eligible for funding assistance to attend the conference via the waiver. To receive this funding, complete this form and contact your care coordinator at your managed care organization (MCO) and let them know that you wish to use Natural Supports Education funds for your conference expenses.

The MCO care coordinator or accounting department will then forward a purchase-order request or check to the address indicated above.

Questions? Please contact David Laxton at 800-442-2762, ext. 1111, or dlaxton@autismsociety-nc.org