**Speech Pathologists and Audiologists in Louisiana Schools, Inc.**

PO Box 12177 Lake Charles, LA 70612

| Name: |  | |  | |  |
| --- | --- | --- | --- | --- | --- |
| Home Address: |  | |  | |  |
| City/State/Zip: |  | |  | |  |
| Email Address: |  | |  | |  |
| Home Phone: |  | | Work Phone: | |  |
| Employer: |  | | Region: | |  |
| **Conference Registration (Please Circle Selections)**  NOTE: Registrations received late (after September 15th) may be processed as on-site registrations. Lunch is included in the pre-conference registration fee. | | | | | |
|  | | **Early** (by 9/15) | | **Regular** (after 9/15) | |
| **SPALS Membership** | | $40 | | $45 | |
| **Member: 1 Day \*** | | $115\* | | $135\* | |
| **Member: 2 Days \*** | | $135\* | | $160\* | |
| **Non-Member: 1 Day** | | $185 | | $205 | |
| **Non-Member: 2 Days** | | $220 | | $245 | |
| **\*To be eligible for special membership conference pricing,**  **membership dues must be paid. Please include.** | | | | | |
| Total Amount Enclosed: $ \_\_\_\_\_\_\_**\* (remembered membership?)** | | | | | |

\_\_\_ My registration fee will be paid by my employer by September 15th, 2023. School districts must adhere to all registration deadlines.

Applicable forms available at [www.spals.org](http://www.spals.org)

**SPALS Accepts cash, check, credit card, money order, or school vouchers, only.**

Please make checks payable to **SPALS, Inc.**

***A $50 processing fee will be charged on all NSF checks.***

**NO** payments will be accepted after the conference. **No monetary refunds will be issued for cancellations. A credit toward next year’s conference will be considered on a case by case basis on written requests submitted prior to conference dates.**

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