



PARID Virtual Conference November 3-5, 2023 Registration Form

PARID use only
Check #:
Amount:
Received:
Confirmed:

Personal Information:

Name: _____ RID Number: _____
 (As you wish it to appear on your name badge)

Phone: (_____) _____ Email: _____

Comprehensive Registration		
Includes all seminars Friday, Saturday and Sunday.		
	Postmarked by	
	8/30/23	10/30/23
PARID Member	\$100	\$130
Non-PARID Member	\$140	\$170
Student Member of PARID	\$50	\$65
<p>Make Checks Payable to PARID. There is a \$35 fee for returned checks.</p>		<p>Refunds of the registration fee minus \$10 will be issued if requested in writing to conference@parid.org by 10/1/23.</p>
<p>Accommodations: Requests cannot be guaranteed if received after 10/1/23.</p> <p>All sessions will be in ASL only.</p> <p>_____ No accommodations, I understand ASL.</p> <p>_____ Other: Specify _____</p>		

Payment Information

Registration Fee \$
 Donation \$
 Total Enclosed \$

Return this completed form and payment to:

PARID
 1209 Main St Apt 4
 Bloomsburg, PA 17815

Direct Questions to conference@parid.org.