

## Step 1: Tell Us About Yourself

Please duplicate this form as needed.

Early Registration Discount Deadline: August 10, 2018

Organization: \_\_\_\_\_  
 Person Completing Form: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Complete only if you are registering additional attendees. (Each person receives confirmation. Please provide e-mail addresses.) PLEASE PRINT LEGIBLY. Duplicate form as needed.**

|   |   |
|---|---|
| 1. Name: _____ <input type="checkbox"/> First Time Attendee | Indicate day(s) attending: <input type="checkbox"/> Tue. <input type="checkbox"/> Wed. <input type="checkbox"/> Thur. |
| Title: _____  | E-mail: _____   |
| 2. Name: _____ <input type="checkbox"/> First Time Attendee | Indicate day(s) attending: <input type="checkbox"/> Tue. <input type="checkbox"/> Wed. <input type="checkbox"/> Thur. |
| Title: _____  | E-mail: _____   |
| 3. Name: _____ <input type="checkbox"/> First Time Attendee | Indicate day(s) attending: <input type="checkbox"/> Tue. <input type="checkbox"/> Wed. <input type="checkbox"/> Thur. |
| Title: _____  | E-mail: _____   |
| 4. Name: _____ <input type="checkbox"/> First Time Attendee | Indicate day(s) attending: <input type="checkbox"/> Tue. <input type="checkbox"/> Wed. <input type="checkbox"/> Thur. |
| Title: _____  | E-mail: _____   |

**Special Events: Please indicate if you are planning to attend.**

Casino Night (Wed., Aug. 29, 2018)  Yes  No

To Opt Out of Exhibitor Mailing List (email and/or direct) check box to the right.

## Step 2: Calculate Your Fees

| I wish to register at the following rates:<br>(✓ Check all that apply.)   | Member   |                                     | Nonmember<br>Registration<br>Fees | Quantity           | Total    |
|---|--|-------------------------------------|-----------------------------------|--------------------|----------|
|   | Early<br>Registration<br>Discount through 8/10 | Full Registration<br>Fee after 8/10 |                                   |                    |          |
| <b>Full (3 days)</b> Includes all days (Tue., Wed., Thur.)  |  |                                     |                                   |                    |          |
| <input type="checkbox"/> Full Attendee*   | \$475  | \$525                               | \$625                             | # _____ x \$ _____ | = _____  |
| <b>Two Day</b> Choice of two, please select: <input type="checkbox"/> Tue. <input type="checkbox"/> Wed. <input type="checkbox"/> Thur.   |  |                                     |                                   |                    |          |
| <input type="checkbox"/> Attendee TWO DAY   | \$375  | \$425                               | \$525                             | # _____ x \$ _____ | = _____  |
| <b>One Day</b> Please select: <input type="checkbox"/> Tue. <input type="checkbox"/> Wed. <input type="checkbox"/> Thur.  |  |                                     |                                   |                    |          |
| <input type="checkbox"/> Attendee* ONE DAY  | \$195  | \$250                               | \$300                             | # _____ x \$ _____ | = _____  |
| <b>Bring Your Team</b> (Up to 8 people full conference access) Indicate above day(s) ea. member will attend.  |  |                                     |                                   |                    |          |
| <input type="checkbox"/> Attendee   | \$2,850  | \$2,950                             | N/A                               | # _____ x \$ _____ | = _____  |
| <b>Full Conference Rate:</b> Includes all education sessions, handouts, up to 16 continuing education units per person, continental breakfasts, Wed. evening Casino Night, Awards luncheons and breaks for each attendee. |  |                                     |                                   | <b>Grand Total</b> | \$ _____ |

### 2 Ways to Register:



**1. Online Registration:**  
www.LeadingAgeOhio.org



**2. Mail** your completed form with payment to:  
LeadingAge Ohio  
2233 North Bank Drive  
Columbus, Ohio 43220

Registration and attendance at, or participation in, LeadingAge Ohio meetings and other activities constitutes an agreement by the registrant to use and distribute photographs of the registrant's image. I authorize LeadingAge Ohio to use and publish the same in print and/or electronically. I agree that LeadingAge Ohio may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

**Special Note:** If you require special services or have special dietary concerns, please describe your needs in writing and send via e-mail by August 20 to Corey Markham at [cmarkham@leadingageohio.org](mailto:cmarkham@leadingageohio.org).

\* Subsidized rates for students and members in need are available upon request.