

Delegate Registration Form (Please print)

Name _____ Position _____

Organization _____

Address _____

City _____ Postal Code _____

Email _____ Fax _____

Bus. Phone _____ Ext _____ Home Phone _____

Concurrent Sessions

Please circle your choice for each session

A ___A1 ___A2 ___A3

B ___B1 ___B2 ___B3

C ___C1 ___C2 ___C3

D ___D1 ___D2 ___D3

Deadlines (check your registration options)

Early registration for professionals \$ 175
*Postmarked by Sept. 20, 2008

Late registration for professionals \$ 250

Family members (each) \$ 75

Survivors (each) \$ 75

Your registration fee must accompany this form or the registration will not be processed.

BIAN reserves the right to restrict participation, and/or the right to adjust the program or cancel this conference due to insufficient registration or circumstances beyond our control.

Register early! Space is limited!

Please mail your registration form along with your cheque made payable to:

Brain Injury Association of Niagara
Normandy Resource Centre
111 Church Street
St. Catharines, ON L2R 3C9

Cancellation Policy

Refund of registration fees will be made, less a \$50 administration fee, with written notice postmarked by October 10, 2008. No refunds issued after this date, although delegate substitution is acceptable. No registrations will be accepted on the day of the conference.

Continuing Education Credits

Delegates are encouraged to review self-assessment guidelines issued by their professional college/association for continuing education credits, or contact their professional college or association for further info. Please indicate if you require a conference attendance certificate. ___Yes ___No

Exhibit Space

Exhibitor space is available to agencies who wish to share information about their services, programs and/or products at the conference. Exhibitor fee includes 6' x 10' space, draped table, one chair and one non-transferable exhibitor registration. **Register early. Space is limited.** Additional participants pay the individual professional rate.

Please check all that apply:

- Exhibitor registration:
Display area and non-transferable registration \$400
- Electrical outlet needed ___Yes ___No

Exhibit set up time: 6:30 to 7:00 a.m. on October 23, 2008. Tear down at 5:30 p.m.

To reserve exhibit space please complete and return no later than September 30, 2008 along with your cheque payable to Brain Injury Association of Niagara.

Registration Forms

Additional registration forms can be downloaded from BIAN's web site at:

www.niagara.com/bian

Accommodation

Four Points Sheraton (across from Brock University)
3530 Schmon Parkway, Thorold, ON

A limited number of rooms have been block booked at the conference rate until September 22, 2008. For reservations call 905-984-8484. Standard Room rate \$119 plus taxes, based on single/double occupancy. (\$10 room charge per adult.)

Directions from Toronto, Ontario

- QEW toward Niagara
 Take Hwy #406 exit toward Thorold/Welland/Pt. Colborne and merge onto #406 South
 Take #71 West - St. David's Road exit
 Turn slight right onto #71/St. David's Rd.
 Turn left onto Schmon Parkway