

Northeast Cochlear Implant Convention July 13-15, 2007

Program Registration Form

Please complete both sides of this form.

Please photocopy if additional forms are needed. Each adult or child attending must be entered so that name badges can be prepared. Advance Children's Program registrations must be postmarked by June 1, 2007!

Adult #1

Adult #2

Name_____

Name_____

Preferred first name for name badge_____ Preferred first name for name badge_____

Parent___ Professional___ Adult w/CI___ Spouse___ Grandparent___ Exhibitor___ Other___

Street_____ City_____ State_____ Zip_____

E-Mail_____ Phone_____

Professionals: Degree/Certification (e.g. M.S., M.E.D., CCC-SLP)_____

Organization for name badge_____ City/State_____

Children's Program Registration (Saturday and Sunday only)

Parent's cell phone_____ (During sessions cell phones should be set to vibrate.)

| Child's Last Name, First Name | Date of Birth (MM/DD/YY) | Hearing Status | Needs Sign Language Interpreter? |
|-------------------------------|--------------------------|----------------|----------------------------------|
| | | | |
| | | | |

*CI = Cochlear Implant User D = Deaf, no aids or implant HA = Hearing Aid User H = Hearing

This convention is an opportunity for your child to make new friends, and there will be an emphasis on everyone getting acquainted. However, if your child wishes to ask for one friend to be in their small chaperone group, we will try to accommodate. We can't guarantee such placements and cannot respond to such requests during on-site registration. The age groups for the individual children's programs are: 0-3 years, 3-5 1/2 years, 5 1/2 - 7 years, 8 -10 years and 11-18 years on 7/15/07.

| Child's First Name | Friend's Full Name | Age Group |
|--------------------|--------------------|-----------|
| | | |

Children's Program Coordinators: Ages 0 - 3 Years: Judy Orloff <judyorloff@comcast.net>
Ages 3 - 10 Years: Carol A. Steele <casteele@facil.umass.edu>
Ages 11 - 18 Years: Nancy Dolberg <dolberg@rcn.com>

Please state any special requirements or considerations (medical conditions, allergies, dietary restrictions, interpreter requirements (ASL or Signed English), etc.) for child registrants. Specify the child's name. (Note: Children who are susceptible to severe allergic reaction cannot be accommodated in this program.)

As noted in the Children's Program Guide, some children's activities have minimum age or developmental requirements. For children not meeting these requirements, child care will be provided. Please submit this advance registration form and fees by June 1, 2007. Space in the Children's Program is limited and will be available on a first-come, first-serve basis after that date. Registration for some groups may close earlier due to space limitations.

Convention Program Fees
Advance Registration for the Children's Program must be postmarked by June 1, 2007.
All mailed-in registrations must be postmarked by July 6, 2007.

Due to the limitations on the number of children who can be registered in the children's Program, a special advance registration is made available to members of the Minuteman Implant Club. After June 1, 2007, space in the Children's Program will be available on a first-come, first-serve basis. Please check appropriate fees and calculate total below. Saturday-only and Sunday-only registrations are not offered. Grandparents and spouses who are attending only the Grandparents Circle or the Spouses Rap Session and/or the Saturday Evening Banquet, and are not attending other sessions, do not need to pay a registration fee. Child care will not be provided on Friday. Parents will not be allowed to bring children into educational sessions.

REFUNDS: Fees will be refunded if we are notified of cancellations no later than July 8, 2007.

| | Adult #1 | Adult #2 |
|--|--|--|
| Adult's Name (Please Print) _____ | | |
| Saturday and Sunday only (Includes Saturday buffet lunch) | ___\$70 | ___\$70 |
| Friday professional day only (Includes buffet lunch) | ___\$110 | ___\$110 |
| All three days (Fri., Sat., Sun.,) (Includes Friday and Saturday buffet lunches) | ___\$180 | ___\$180 |
| Saturday Evening Adult Banquet (with speaker & entertainment) | ___\$45 | ___\$45 |
| Specify entree desired: | ___ Sturbridge Roast Turkey/Stuffing & Gravy | ___ Sturbridge Roast Turkey/Stuffing & Gravy |
| Gravy | ___ Roast Salmon/Raspberry Thyme Sauce | ___ Roast Salmon/Raspberry Thyme Sauce |
| Sunday Barbecue Luncheon (Chicken, hamburgers, hot dogs, salads, watermelon, pie beverages) | ___\$17 | ___\$17 |

| Children's Program | Fee | | No. of Children | | Amount |
|--------------------------------|------|---|-----------------|---|----------|
| Saturday and Sunday Activities | | | | | |
| Children under 11 | \$35 | x | _____ | = | \$ _____ |
| Youth 11 and over | \$45 | x | _____ | = | \$ _____ |
| Saturday Evening Dinner | \$9 | x | _____ | = | \$ _____ |
| Saturday Barbecue Luncheon | \$12 | x | _____ | = | \$ _____ |

(Together with adults) Barbecue luncheon is free for children under 3.

Donation: \$ _____

The expenses of the Children's Program are only partially offset by fees. Your valued donation to this program is tax-exempt. The MIC is a non-profit organization recognized by the Federal Internal Revenue Service under Section 501 (c)(3).

TOTAL AMOUNT ENCLOSED (Please double-check your figures!) _____

Make checks payable to "**MIC Convention.**" Please return this completed form with your check ASAP to:

Terri Charles, 2 Westview Terrace, Natick, MA 01760.

No purchase orders, please. Questions regarding program fees can be e-mailed to <terri.charles@rcn.com>