

Registration Form for WMU Students, Faculty, and Supervisors

Van Riper Lectures in Speech-Language Pathology and Audiology, October 15 and 16, 2009.

If you are a WMU faculty member, an off-campus supervisor of WMU students in SPPA during the current or past academic year, or a currently enrolled WMU student majoring in SPPA, please use this form to register.

Please **print** all information. Mail with the appropriate fee, in time for receipt at WMU by October 1, 2009. If you wish to receive ASHA Continuing Education Units, add five dollars to your registration fee and be sure you have paid your annual ASHA continuing education fee to the ASHA national office.

Name (as would appear on nametag) _____

Workplace (as would appear on nametag) _____

Please indicate professional specialty:

- speech-language pathology
- audiology
- other: _____

Highest Degree Held:

- Au.D.
- B.A./B.S.
- M.A./M.S.
- Ph.D.
- M.D.
- Other: _____

Office Address _____

Street

City

State/Province

Zip/Postal Code

Home Address _____

Street

City

State/Province

Zip/Postal Code

Check the appropriate fee category and enclose the indicated total with your registration.

- \$ 25: currently enrolled WMU student majoring in SPPA
- \$ 25: WMU faculty
- \$ 25: off-campus supervisor of WMU student practicum in speech-language pathology or audiology during current or past academic year
- \$10: Michigan SB-CEU credit desired (pending approval)
- \$ 5: ASHA CEU credit desired (pending approval)

Total \$ _____ enclosed with registration form (MAKE CHECKS PAYABLE TO WMU)

Mail to: Van Riper Lectures, Speech Pathology and Audiology, Western Michigan University, 1903 W. Michigan, Kalamazoo, MI 49008-5355.

- I require the services of an interpreter:
- oral
- manual

I require other special services: _____

Registration and course materials are both available in alternative formats upon request.