

# 2017 ASPPA Webcast Registration Form

## Registrant Information

Webcast Title:	
Webcast Date:	

## Registrant Information

Name:		Title:	
Company:			
Address:		Type:	<input type="checkbox"/> Home <input type="checkbox"/> Business
City/State/Zip:			
Daytime Phone:			
Email:			
PTIN for ERPA CE Credits			

## Registration Fees

### Live Webcast

Individual Viewer:	<input type="checkbox"/> Member* \$115	<input type="checkbox"/> Non-Member \$190
Additional Viewer:	<input type="checkbox"/> Member \$45	<input type="checkbox"/> Non-member \$70

## Registration Fees

### Recorded Webcast

Individual Viewer:	<input type="checkbox"/> Member* \$115	<input type="checkbox"/> Non-Member \$190
Additional Viewer:	<input type="checkbox"/> Member \$45	<input type="checkbox"/> Non-member \$75

Classroom Setting Registration	Please visit <a href="http://www.asppa-net.org/webcast-package-pricing">www.asppa-net.org/webcast-package-pricing</a> for more information and ways to register.
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<b>Total:</b>	\$ _____
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*\*ASPPA membership is individual. If you are personally a member, please pay the member rate.  
If you are not sure, please call 703.516.9300.*

**PAYMENT** Credit card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover ☐ Check

Card No.: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Mail checks to: ASPPA, PO Box 34725, Alexandria, VA 22334-0725

Please attach copy of this order form for faster processing. To prevent duplication of payment, send your registration form only once. If you are mailing it, do not fax it and vice versa.

