## ILRTA Conference – Registration Form October 28 & 29, 2013 Register by October 8, 2013 and SAVE MONEY! For questions or additional information please call 708 687 4396

Name (Mr. Ms. Dr.)	Agency /Job Title		
Address (Home preferred)	City	S	tateZip
Work Phone	Home Pho	one	
Cell Phone	Email		
Conference fee includes continental breakform  Please provide vegetarian lunch  Please indicate special diet considerat  I would like to reserve table space to p	ions		 cility (\$10.00)
If you have any disability that requires special matdorilrta@yahoo.com	terials or services, please	e contact the ILRTA office at	: 708- 687- 4396, or ema
Full Two Day Conference (Includes a free 2014 ILRTA membership)	Postmarked by Oct. 8	Postmarked after Oct. 8	At the Door
Professional Student (does not include CEUs)	\$ 225.00 \$ 75.00	\$ 235.00 \$ 85.00	\$ 250.00 \$ 95.00
One Day Attendance (Includes a free 2014 ILRTA membership)			
Professional Student (does not include CEUs)	\$ 135.00 \$ 50.00	\$ 145.00 \$ 60.00	\$ 155.00 \$ 70.00
If you are registering for one day, please ind	dicate day of attendar	nce O Monday O Tue	sday
Table space for T.R. Agency Exhibit	\$10.00		
Table for Vendors	\$50.00		
Additional Lunch Tickets \$30.00 \$	\$		
TOTAL FEES ENCLOSED:	\$		
Please make check payable and mail to:	<i>ILRTA</i> Post Office Box # Oak Forest, IL 604		
ILRTA MEMBERSHIP INFORMATION		. <del>-</del>	
Membership year: January 1, 2014 to December	31, 2014 (Membership in	cluded in Conference Fee)	
Please select membership category: <b>Professional \$40.00</b>			
Please select your region of the state: Nor		alSouthern	
ATRA member: Yes No	-		
Please select your service area:			
Child lifeCommunityCorrectionsDevel	•	_	
GerontologyPhysical Medicine/RehabSul		·	ics
Psychiatric/Mental HealthOther			