



# 25<sup>th</sup> Annual Scott Haug Audiology Retreat

## Attendee Registration Form

Sept 17<sup>th</sup> – 20<sup>th</sup>, 2009, [www.scotthaug.org](http://www.scotthaug.org)  
 Scott Haug Foundation- PO Box 2836; Red Oak, TX 75154

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: (W) \_\_\_\_\_ (H) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

(Okay to add to SHF web mail database? Yes \_\_\_ No \_\_\_)

Name Tag Preference: \_\_\_\_\_

Affiliation: \_\_\_\_\_

City/ State: \_\_\_\_\_

Spouse's Name Tag: \_\_\_\_\_

Will you need a box lunch on Thursday? Please check \_\_\_ YES \_\_\_ NO

Last Retreat Meal: (Check Day & Meal) \_\_\_ Thurs \_\_\_ Fri \_\_\_ Sat \_\_\_ Sun  
 \_\_\_ Breakfast \_\_\_ Lunch \_\_\_ Dinner

\_\_\_ This is my first Retreat  
 \_\_\_ Prefer Vegetarian Meals  
 \_\_\_ Interested in running for SHF Board of Directors  
 \_\_\_ Need Assistive Devices/Service  
 Please specify \_\_\_\_\_

**TUITION:** (Includes all meals, breaks, evening entertainment & CASA)  
**Check all that apply**

Member  \$365  
 Non-Member  \$415  
 Full-time Student  \$175

University name: \_\_\_\_\_

Late Fee (If rec'd after August 1st)  \$ 25

Membership for 2009  \$ 35  
 (Form available on website)

Spouse (Meals/CASA/Fun!)  \$175

Activities: Choose one

Golf  \$ 35  
 Tubing  \$ 20

TOTAL ENCLOSED \$ \_\_\_\_\_

Check # \_\_\_\_\_ Dated \_\_\_\_\_

SHF accepts Visa and Master Card!

CC #: \_\_\_\_\_

Billing address zip code: \_\_\_\_\_ Exp. \_\_\_\_\_

Signature: \_\_\_\_\_  
 (Refund policy: 100% refund will be issued for cancellations prior to August 21<sup>st</sup>, 2009)

Hotel reservations can be made directly by calling TBarM Ranch and Resort at 800-292-5469 before AUGUST 21<sup>st</sup>, 2009 to secure a great rate and guarantee availability.

IF YOU ARE INTERESTED IN VOLUNTEERING, PLEASE CONTACT US ON OUR WEBSITE: [www.scotthaug.org](http://www.scotthaug.org)