

33rd CONVENING of CRISIS INTERVENTION PERSONNEL - CONTACT USA CONFERENCE - LIFELINE INTERNATIONAL

CONFERENCE REGISTRATION and SESSION SELECTION FORMS

Check boxes below for events you plan to attend

| Name | Position | Thursday Reception | Friday Breakfast | Friday Reception | Saturday Breakfast | Saturday Banquet | Sunday Breakfast |
|------|----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| 9 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Acknowledgements of Registration by E-Mail will be sent to the individual, group or agency indicated below.

Name Phone Number
 Organization Address
 City State Zip Code Country
 E-mail

REGISTRATION FEES

| | | | |
|--|------------------|---------------|--|
| individual Pre-Registration | Prior to 3/30/09 | After 3/30/09 | |
| <input type="checkbox"/> Thursday through Sunday | \$350.00 | \$395.00 | |
| <input type="checkbox"/> Friday afternoon through Sunday | \$175.00 | \$225.00 | Individual Fees: \$ <input type="text"/> |

GROUP DISCOUNT FEES (available until March 30, 2009 only.)

| # of Delegates | Fee for 5/8/09 through 5/10/09 | Fee for 5/7/09 through 5/10/09 |
|----------------|--------------------------------|--------------------------------|
| 4 | \$ 600.00 | \$1300.00 |
| 5 | \$ 750.00 | \$1625.00 |
| 6 | \$ 900.00 | \$1950.09 |
| 7 | \$1050.00 | \$2275.00 |
| 8 | \$1200.00 | \$2600.00 |
| 9 | \$1350.00 | \$2925.00 |
| 10 | \$1500.00 | \$3250.00 |
| 11 | \$1650.00 | \$3575.00 |
| 12 | \$1800.00 | \$3900.00 |
| 13 | \$1950.00 | \$4225.00 |

GUEST FEES

| | |
|---|----------|
| Thursday and Friday Receptions, Saturday banquet and two breakfasts | \$175.00 |
| Saturday banquet only | \$100.00 |
| Friday Reception | \$ 75.00 |

Groups of 14 or more, contact CONVENING

Group Fee Total \$

If you are not registering for Thursday through Friday but wish to attend the ASIST workshop and/or the Saturday night banquet, there is a \$100 fee for each event. Please check the appropriate box(es) on the registration forms and include appropriate payment.

Additional Fees \$

* **Presenters** whose fees have been reduced because they are presenting may not be included in the Group Registration and should register separately.

CONTINUING EDUCATION: Registration for CEUs will be available at the time of the conference. There will be a fee of \$25.00 (USD) for administering the credits. Do not enclose CEU fees with this registration.

Please make all checks payable to CONVENING

Continue on next page

SESSION SELECTION FORM

33rd ANNUAL CONVENING OF CRISIS INTERVENTION PERSONNEL
CONTACT USA CONFERENCE and LIFELINE INTERNATIONAL

May 7, 8, 9, 10, 2009

Please indicate your first, second, and third preference for each block of presentations by placing the letter associated with the session (A, B, C, D, etc.) next to your first, second and third choice for each block of sessions. First preferences will be assigned whenever possible. Sessions are filled on a first come, first serve basis. The CONVENING program available at the time of the conference will indicate the sessions to which you have been assigned. Presenters are also encouraged to indicate their preferences for presentations they would like to attend. For those who might wish to change assigned sessions, opportunities will be provided on Thursday, Friday and Saturday.

Name Presenter Enroll me in the ASIST Program

| | | | | | | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| Session I | Session II | Session III | Session IV | Session VI | Session VII | Session VIII | Session IX | Session X | Session XI | Session XII |
| 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> | 1st <input type="checkbox"/> |
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