

**REGISTRATION FORM**

(Please print clearly so confirmation and directions can be e-mailed.)

**DIR®/ Floortime Case Based Conference**

with

**Sherri Cawn, MA, C.C.C., SLP**

**DIR® Faculty**

and

**Rosemary White, OTR/L**

**DIR®/Faculty**

**Seattle, Shoreline Center September 25 &26, 2010**

**Shoreline Conference Center**

**18560 1st Ave. NE**

**Shoreline, WA 98155-2148**

**(15 miles north of Seattle)**

**Registration 8AM to 9 AM – Conference 9 AM to 4:30 PM**

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

**Please Indicate: Parent/ MD/ OT/ ST/ PT/ Psych/ Social Work/ Educator/ Other**

**Address** \_\_\_\_\_

**City/State/ZIP:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Parent/Student - \$200; Couple \$350; Professional - \$275; 3 or more \$225 each**

**METHOD OF PAYMENT:**

**Enclosed is a check in the amount \$** \_\_\_\_\_  
**(Payable to: Pediatric Therapy Seminars)**

**Credit Card:** \_\_\_ Visa \_\_\_ MasterCard

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**In the amount of: \$** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

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**Authorized signature** **Date**

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**Please mail or fax form with payment to:**

**Pediatric Therapy Seminars**  
**20310 19<sup>th</sup> Ave NE, Shoreline, WA 98155**  
**Phone: 206-367-5853**  
**Fax: 206-367-9609**