2024 MIDWEST REGIONAL CONFERENCE 10TH BIENNIAL

LOCATION: TBD

FRIDAY, AUGUST 2- SUNDAY, AUGUST 4, 2024

CONFERNECE THEME: REFRESH. RENEW. REFOCUS.

REGISTRATION DEADLINE: JUNE 30, 2024

* Indicates required question

1. Email *



- 2. LAST NAME *
- 3. FIRST NAME *

4. MEMBERS *

COMBO INCLUDES:

TWO (2) KEYNOTE SPEAKERS
FOUR (4) PROFESSIONAL WORKSHOPS
EARN UP TO 0.60 RID CMP CEUS
ENTERTAINMENTS: DEAF PERFORMERS
DOOR PRIZES & MORE!!

VOICE INTERPRETER WILL BE PROVIDED

REGULAR: \$160.00

SENIOR CITIZEN (55 & UP ID REQUIRED): \$150.00 COLLEGE STUDENT (COLLEGE ID REQUIRED): \$150.00

****After clicking submit button, you will receive a link and an email to submit your payment. Small transaction fee will be applied.*****

****NO PERSONAL CHECK WILL BE ACCEPTED****

MONEY ORDER AND CASHIER'S CHECK ARE ACCEPTED

Please make your payment to:

ICBDA

Attn: Conference Treasurer Post Office Box 20471 Indianapolis, IN 46220

On the memo line: 2024 MWRC Registration

JOIN OR RENEW NBDA MEMBERSHIP: https://www.icbdainc.org/membership-sign-up/

CANCELLATION/REFUND POLICY: BASED ON REGISTRATION FEE, FIFTY PERECENT (50%) WILL BE RETURNED, IF REQUEST MADE ON OR BEFORE MAY 31, 2024.

AFTER MAY 31, 2024, NO REFUND WILL BE GIVEN UNLESS IN EVENT OF MEDICAL EMERGENCIES OR DEATH IN THE FAMILY. PROOF MUST ACCOMPANY THE REQUEST IN WRITING.

ANY QUESTIONS OR CONCERNS, PLEASE EMAIL:

MWRC.CHAIR@ICBDAINC.ORG

Mark only one oval.

\subset	REGULAR \$160.00
	SENIOR CITIZEN \$150.00

	COLLEGE STUDENT \$150.00 NOT A MEMBER
5.	MEMBER STATUS: *
	Mark only one oval.
	MEMBER MEMBER AT-LARGE (MAL) NON-MEMBER
6.	CHAPTER LOCATION: *
	Mark only one oval.
	BUCKEYE BDA CHICAGOLAND BDA CLEVELAND BDA DETROIT BDA INDIANA CHAPTER BDA SAINT LOUIS METRO BDA SAINT PAUL/MINNEAPOLIS BDA MAL NONE Other:

7. NON-MEMBERS *

COMBO INCLUDES:

TWO (2) KEYNOTE SPEAKERS
FOUR (4) PROFESSIONAL WORKSHOPS
EARN UP TO 0.60 RID CMP CEUS
ENTERTAINMENTS: DEAF PERFORMERS
DOOR PRIZES & MORE!!

REGULAR: \$210.00

SENIOR CITIZEN (55 & UP ID REQUIRED): \$200.00 COLLEGE STUDENT (COLLEGE ID REQUIRED): \$200.00

****After clicking submit button, you will receive a link and an email to submit your payment. Small transaction fee will be applied. *****

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Mark only one oval.

REGULAR \$210.00
SENIOR CITIZEN \$200.00
COLLEGE STUDENT \$200.00
N/A

8.	RID MEMBER#	
9.	AMERICANS WITH DISABILITIES ACT REASONABLE ACCOMMODATIONS REQUEST:	*
	Mark only one oval.	
	CART	
	DEAF INTERPRETER	
	LOW VISION - FRONT ROW	
	ProTactile INTERPRETER	
	VOICE INTERPRETER	
	NO ADA ACCOMMODATION NEEDED	
	Other:	
F	OOD SELECTIONS	
10.	FOOD ALLERGIES: PLEASE LIST *	
	Check all that apply.	
	REGULAR - NO ALLERGIES	
	NUT ALLERGIES	
	GLUTENS FREE	
	VEGATARIAN VEGAN	
	Other:	

Survey Questionnaire

SURVEY WILL BE FOR ICBDA/MIDWEST BDA PURPOSE ONLY AS AN ESTIMATE OF HOW MANY ATTEND THE CONFERENCE. NAMES WILL NOT BE ASSOCIATED WITH THE STATISTIC INFORMATION

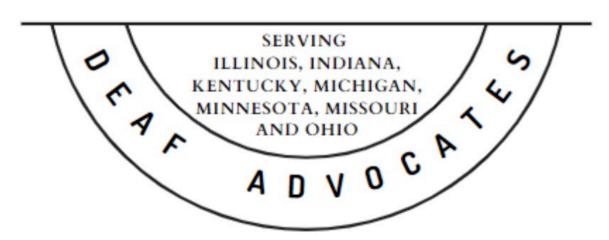
11.	HEARING STATUS: *
	Mark only one oval.
	DEAF DEAFBLIND HARD OF HEARING HEARING Other:
12.	RACE IDENTITY: *
	Check all that apply.
	AMERICAN INDIANA OR ALASKA NATIVE ASIAN BLACK OR AFRICAN AMERICAN HISPANIC OR LATINO NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER WHITE Other:
13.	GENDER IDENTITY: *
	Check all that apply.
	FEMALE MALE NON-BINARY TRANSGENDER PREFER NOT TO SAY Other:

Check all that apply. DEAF-ASL INTERPRETER AMERICAN SIGN LANGUAGE-ENGLISH INTERPRETER DEAF ADVOCATE ADVOCATE FOR THE DEAF DEAF TEACHER TEACHER OF THE DEAF DEAF PARENT PARENT OF DEAF CHILD(REN) INTERPRETER CEUS TRAINING GOVERNMENT OFFICIAL TO LEARN ABOUT MY RIGHTS AND ENJOY THE CONFERENCE ALLIES Other:

14. REASON(S) FOR ATTENDING: *



MIDWESTERN REGION



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