



WEBCAST INFORMATION					
Webcast Title:					
Webcast Date:					
webcast Date.					
REGISTRANT INFORMATION					
Name:			Title	:	
Company:					
Address:			Туре	□ home □ business	
City/State/Zip:					
Daytime Phone:					
Email:					
REGISTRATION FEES					
INDIVIDUAL REGISTRATION PRICES (recorded only)					
Individual Viewer:		☐ Member \$110		Non-member \$180	
Additional Viewer:		☐ Member \$40		□ Non-member \$65	
		= Monther 405			
CLASSROOM REGISTRATION PER WEBCAST (recorded only)					
Single location:		□ \$1,000			
Multiple locations:		\$1,500			
REGISTRATION PR	ICE FOR ALL 7 WI	EBCASTS (recorded only)			
Individual Viewer:		☐ Member \$399	<u> </u>	Non-member \$449	
CLASSROOM REGI	STRATION PRICE	FOR ALL 7 WEBCASTS (recorde	d only)		
Single location:		□ \$3,500			
Unlimited locations:		□ \$5,000			
TOTAL: \$					
*ASPPA membership is individual. If you are personally a member, please pay the member rate. If you are not sure, please call 703.516.9300.					
PAYMENT	Credit card:	☐ Visa ☐ MasterCard	☐ American Expres	s 🗖 Discover 🗖 Check	
Card No.:				Expiration date:	