

**KHS ANNUAL CONFERENCE March 14-15, 2019  
Conference Registration and Membership Dues**

*Complete this fillable PDF Form, Print it out and either fax it with CC information or Mail it in with check payment (see fax and mailing information below)*

**Check your selection below:**

A voluntary donation box is included with your registration form below. Our investment income is very low.  
Please donate whatever you can for continued improvements for KHS.

**Members - Voting and Affiliate**

- Renewing and Attending Conference \$325\*
- Renewing and Not Attending Conference \$60
- Reactivate Membership & Attending Conference \$335
- Joining (Includes Fee to Attend Conference) \$350

**Members - Licensed Exempt Dispensing Audiologists (Working Only For Any Government Agency)**

- Renewing and Attending Conference \$150\*
- Renewing and Not Attending Conference \$60
- Reactivate Membership & Attending Conference \$185
- Joining (Includes Fee to Attend Conference) \$200

**Non-Member**

- Conference Attendance \$375\*
- Joining (Includes Fee to Attend Conference) \$350

**Audiology Student Not Licensed \$0**

- Extra Friday Luncheon Ticket \$25
- Request a non-meat lunch

\* Add \$50 if paying after Feb. 25, Add \$75 if registering at the door.

- Voluntary Donation \_\_\_\_\_

**Total Amount \$ \_\_\_\_\_**

Payment Method: Paid by Check # \_\_\_\_\_

Paid by Credit Card (Check type)  VISA  Mastercard  Discover

*If paying by any credit card, add \$10.00 for Processing Fee*

CC# \_\_\_\_\_ Exp. Date (MM/YY) \_\_\_\_\_ CODE \_\_\_\_\_

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

E-Mail \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City, \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bus. Ph. ( \_\_\_\_\_ ) Bus. Fax ( \_\_\_\_\_ ) \_\_\_\_\_

**Print out completed form and Fax to: (316) 928-2068 or  
Mail to: Kansas Hearing Society, 2812 E. Menlo, Wichita, Kansas 67211**