



**DSHPSHWA / EHDI  
REGISTRATION FORM**

**Early Hearing Detection & Intervention  
2015 Annual Meeting  
March 8-10, 2015  
LOUISVILLE, KENTUCKY**

**EHDI MEETING REGISTRATION**

Early rates valid on or before February 2, 2015.  
Regular rates: February 3-March 2, 2015.  
Onsite registration available March 8-10.

Name: \_\_\_\_\_  
 Credentials: \_\_\_\_\_  
 Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, ST, Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**DSHPSHWA ANNUAL MEETING**

**REGISTRATION.....\$125**

**EHDI MEETING REGISTRATION (Monday & Tuesday):**

**Early (by February 2): \$325    Regular: \$375**

**TO REGISTER: Must be submitted by **March 2, 2015****

1. Register online at: **WWW.EHDIMEETING.ORG** ...or:
2. Send in this completed form with payment:  
 MAIL: Conference Registration Services  
 Utah State University  
 5005 Old Main Hill, Logan UT 84322-5005  
 FAX: 435-797-0636 (24 Hours)  
 PHONE: toll free 800-538-2663 or 435-797-0423  
 E-MAIL: **register.online@usu.edu**  
 Confirmations will be e-mailed within 5 business days of receipt.

**Please check all of the following entities that you represent:**

- |  |   |
|--|---|
| <input type="checkbox"/> Audiologist                         | <input type="checkbox"/> Non-Profit Agency        |
| <input type="checkbox"/> Advocacy Group                      | <input type="checkbox"/> Hospital/Birthing Center |
| <input type="checkbox"/> Medical Provider                    | <input type="checkbox"/> State Health Department  |
| <input type="checkbox"/> Student                             | <input type="checkbox"/> Local Health Department  |
| <input type="checkbox"/> University                          | <input type="checkbox"/> State Education Agency   |
| <input type="checkbox"/> Federal Agency                      | <input type="checkbox"/> Part C Agency/Program    |
| <input type="checkbox"/> Early Intervention Provider         | <input type="checkbox"/> EHDI Coordinator         |
| <input type="checkbox"/> Family of a child with hearing loss |   |
| <input type="checkbox"/> Other, Please Specify: _____        |   |

**A participant list** with contact information will be provided to meeting attendees to enable networking opportunities and will not be distributed in any other way.

- Yes, my contact info may be printed on the participant list.  
 No, do not print my contact info on the participant list.

**SPECIAL NEEDS** Notice of any special needs must be provided by **February 13, 2015** in order to be accommodated.

Please specify any required special dietary needs:  
Vegetarian Vegan Gluten Free  
Allergy/Other: \_\_\_\_\_

Please specify any reasonable accommodations for persons with disabilities: \_\_\_\_\_

**EHDI MEETING PRINCIPLES OF PARTICIPATION**

The right to participate in the EHDI Annual Meeting is fundamental to ensuring open dialogue between all EHDI stakeholders. The Meeting Co-organizers encourage respectful dialogue as a key element of participation among all meeting participants. The EHDI Annual Meeting opposes the disruption of any meeting sessions or events that results in the inability for dialogue to take place. The EHDI Annual Meeting reserves the right to withdraw the name badge, and therefore deny access, to participants who do not adhere to these Principles of Participation.

**I have read and agree to the EHDI Meeting Principles of Participation: (required)**

Captioning services will be provided in all Plenary and Breakout sessions during the EHDI Meeting. ASL interpreter services are available by request. ASL interpreter and CART services for Sunday Instructional Sessions are also available by request.

- Yes, I need ASL interpreting during the EHDI Annual Meeting (Monday & Tuesday)  
Yes, I need ASL interpreting during my Instructional Session/s (Sunday)  
Yes, I need CART captioning during my Instructional Session/s (Sunday)  
Yes, I need a hear kit in my sleeping room  
No, I do not require these services

**CANCELLATION & REFUND POLICY:**

Refunds will be made to those registrants who must cancel, less a \$75 processing fee. Written cancellation requests must be post-marked on or before February 2, 2015. No refunds will be made after that date. Substitutions are welcome at no charge (if additional payment processing is required, a \$25 processing fee will apply).

**I have read and agree to the EHDI Meeting Cancellation & Refund Policy: (required)**

**(Instructional Sessions and payment section on next page.)**

INCLUDED WITH DSHPSHWA MEETING REGISTRATION:

**Desserts With DSHPSHWA**

Saturday, March 7 - 6:30-8:00 p.m.

**EHDI Coordinator Meeting**

Wednesday, March 11 – 8:00 a.m.-2:00 p.m.

**State Stakeholder Meeting**

Monday, March 9 – 9:15 a.m.-10:45 a.m.

Please indicate which State Stakeholder Meeting you will attend: \_\_\_\_\_ (name of state)

I am not attending a State Stakeholder Meeting.

**SUNDAY, MARCH 8, 2015**

**INSTRUCTIONAL SESSIONS**

*DSHPSHWA registration includes one complimentary afternoon Instructional Session listed in this column.*

\*Some sessions have a maximum attendance capacity.

**Considerations for ASL and Spoken English Bilingual Development in Young Children Who Are Deaf or Hard Of Hearing: An Overview**

- Debra Trapani, Rebecca Stevener

1:00 pm – 4:00 pm (\*Max 40)

**Are You Ready for Electronic Health Information Exchange?**

- Jim Jellison

2:00 pm – 4:00 pm (\*Max 14)

**The Art And Science of Effective Conversations for EHDI Professionals**

- Mary Ellen Nevins, Kathy Sussman

2:00 pm – 4:00 pm (\*Max 30)

**Beyond Early Intervention: Supporting Deaf Children Through Elementary School**

- Susan Nittrouer

2:00 pm – 4:00 pm

**How Do We Know if Technology is Doing What it Needs To Do?**

- Jane Madell

2:00 pm – 4:00 pm

**Using the BRIDGE to Better Communication for Early Intervention**

- Christine Pett, Lyra Repplinger

2:00 pm – 4:00 pm

**A Cross Cultural Approach: The Path to Addressing Health Disparities and Accessing and Benefiting from Early Intervention Services**

- Sally Tannebaum, Alejandra Ullauri

2:00 pm – 4:30 pm

**Additional Opportunity:**

**EHDI 101** (no charge – included with registration) **Sunday, March 8 - 4:30-6:00 p.m.**

This workshop is designed for EHDI Meeting first-time participants, to provide general knowledge and understanding about the history and accomplishments of EHDI and resources for EHDI stakeholders.

**Payment Information:**

EHDI MEETING REGISTRATION: \$ \_\_\_\_\_

DSHPSHWA MEETING REGISTRATION \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

Full Payment is required with Registration (*check one*)

Check payable to: **Utah State University Conference Services**

Purchase order # \_\_\_\_\_ (please attach copy)

Credit card transactions, call 800-538-2663 or 435-797-0423

(For paper form orders only. Ordering via the online system enables automatic credit card authorization and payment acceptance. Register online at: **WWW.EHDIMEETING.ORG**)