

# 27 ${ }^{\text {th }}$ ANNUAL CONVENTION Denver • July 18-20, 2024 

## Registration Form

Please complete the form below and mail to: Friends, 278 Shady Brook Drive, Langhorne, PA 19047

| Last Name | First Name | MI | Phone |
| :---: | :---: | :---: | :---: |
| Street Address |  | City | $\overline{\text { State }} \overline{\text { Zip }}$ |
| Email |  | How many years have you attended Friends OR $\square$ $\square \mathrm{lt}$ 's my first time. |  |
| Attendee Names (including yourself if attending): |  |  |  |
| Full Name | Age <br> (children \& teens only) | Status* | Email (if applicable) |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |

*Status (include all that apply): Young Person Who Stutters (YPWS), Adult Who Stutters (AWS), Parent (P), Sibling (S), Friend/Relative (F), Speech-Language Pathologist (SLP), Significant Other (SO)

Registration Fee: \$
Check if applicable: $\square$ My registration is for ONE DAY only. I will attend on:
(Thursday, Friday, Saturday)

I'd like to add a donation:
$\square$ Friend \$100
$\square$ Best Friend \$500Friend for Life $\$ 1000$
$\square$ Other \$ $\qquad$
Total: \$ $\qquad$ Payment Method:Check (payable to Friends) Visa

Name on Card: $\qquad$ Credit Card Number: $\qquad$

Exp. Date: $\qquad$ CVV: $\qquad$ Billing Zip Code: $\qquad$ Signature: $\qquad$

Hotel Information: Book your room by June 25th to take get the Friends discounted rate. Embassy Suites by Hilton Denver Tech Center, 10250 East Costilla Ave, Centennial, CO 80112 Call In Reservations: 303-792-0433 \& use group code NAY Online Reservations: tiny.cc/FriendsHotel

By entering and attending this event, you acknowledge and agree that your likeness may be included in photos and videos of the event and used by Friends to illustrate and promote Friends and its programs. For questions or concerns, please contact friends@friendswhostutter.org.

