


October 12-13, 2019 • Exhibits: October 11-13, 2019  
South Point Hotel & Casino • Las Vegas, NV

## REGISTRATION — Online registration available at [ccapta.org](http://ccapta.org)

**PRINT OR TYPE** (One registrant per form) Mail or Fax completed registration form with payment to: CPTA, 1990 Del Paso Road, Sacramento CA 95834 • (916) 929-2782 • Fax (916) 646-5960

Full Name:	Designation(s):	APTA Member #:
Nickname for Badge:	T-shirt Size (unisex):	S M L XL XXL XXXL
Mailing Address:	How did you hear about Conference?	
City:	State:	Zip:
Daytime phone: ( )	E-mail:	
<input type="checkbox"/> Opt Out of Email Release to Exhibitors	Employer or Self-employed: (required)	
<b>CHECK ALL THAT APPLY:</b>		
<input type="checkbox"/> Physical Therapist (PT)	<input type="checkbox"/> Certified Clinical Specialist	Dietary Needs:
<input type="checkbox"/> Physical Therapist Assistant (PTA)		 <input type="checkbox"/> Check here if you require special assistance during the meeting. CPTA will contact you.
<input type="checkbox"/> Student: <input type="checkbox"/> PT or <input type="checkbox"/> PTA	School:	

## CONFERENCE REGISTRATION

**Full Conference Registration Includes...**Conference Programming, Exhibits, Poster Presentations, Conference T-shirt and Lunch Saturday and Sunday.

**Saturday Registration Includes.....**Conference Programming, Exhibits, Poster Presentations, Conference T-shirt and Lunch on Saturday.

**Sunday Registration Includes.....**Conference Programming, Exhibits, Poster Presentations, Conference T-shirt and Lunch on Sunday.

CONFERENCE (Saturday & Sunday)	Early (by 8/5/19)		Advanced (by 9/23/19)			On-site (after 9/23/19)		
	Full Conference		Full Conference	Saturday Only	Sunday Only	Full Conference	Saturday Only	Sunday Only
APTA PT Member	<input type="checkbox"/> \$285		<input type="checkbox"/> \$385	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$485	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280
APTA PTA Member	<input type="checkbox"/> \$200		<input type="checkbox"/> \$300	<input type="checkbox"/> \$185	<input type="checkbox"/> \$185	<input type="checkbox"/> \$400	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235
Non-Member	<input type="checkbox"/> \$460		<input type="checkbox"/> \$560	<input type="checkbox"/> \$315	<input type="checkbox"/> \$315	<input type="checkbox"/> \$660	<input type="checkbox"/> \$365	<input type="checkbox"/> \$365
PT/PTA Student Member	<input type="checkbox"/> \$175		<input type="checkbox"/> \$275	<input type="checkbox"/> \$170	<input type="checkbox"/> \$170	<input type="checkbox"/> \$375	<input type="checkbox"/> \$220	<input type="checkbox"/> \$220
PT/PTA Student Non-member	<input type="checkbox"/> \$235		<input type="checkbox"/> \$335	<input type="checkbox"/> \$200	<input type="checkbox"/> \$200	<input type="checkbox"/> \$435	<input type="checkbox"/> \$250	<input type="checkbox"/> \$250
Exhibits Only	<input type="checkbox"/> \$150		<input type="checkbox"/> \$150	<input type="checkbox"/> \$75	<input type="checkbox"/> \$75	<input type="checkbox"/> \$180	<input type="checkbox"/> \$95	<input type="checkbox"/> \$95
I would like to R.S.V.P for the Awards Lunch	<input type="checkbox"/> OR <input type="checkbox"/>		I will have lunch in the Exhibit Hall					

### NETWORKING OPPORTUNITIES

Barrels & Brews  \$50  Check here if you are a Platinum or Gold Contributor  
 CAL-PT-PAC Dinner  \$100  Check here if you are a PAC Grizly  Dietary Needs:

PRE-CONFERENCE INSTRUCTIONAL COURSES (Friday, Oct 11, 8:00 a.m. - 5:30 p.m.)	Advanced Registration by 9/23/19		On-site Registration after 9/23/19	
Aquatics (Kathleen Dickinson) .....	<input type="checkbox"/> \$300 APTA Member	<input type="checkbox"/> \$480 Non-member	<input type="checkbox"/> \$400 APTA Member	<input type="checkbox"/> \$580 Non-member
Segmental Lumbar Stabilization Progression into Functional Mobility (Yousef Ghandour) ....	<input type="checkbox"/> \$300 APTA Member	<input type="checkbox"/> \$480 Non-member	<input type="checkbox"/> \$400 APTA Member	<input type="checkbox"/> \$580 Non-member
Advanced Manual and Movement Interventions in the Overhead Athlete (Marcos/Yung) ....	<input type="checkbox"/> \$300 APTA Member	<input type="checkbox"/> \$480 Non-member	<input type="checkbox"/> \$400 APTA Member	<input type="checkbox"/> \$580 Non-member

### PROFESSIONAL CONTRIBUTIONS

CAL-PT-PAC Contribution  \$10  \$25  \$50  \$100  \$ \_\_\_\_\_ Employer (required): \_\_\_\_\_  
 CAL-PT-FUND Contribution  \$10  \$25  \$50  \$100  \$ \_\_\_\_\_

## METHOD OF PAYMENT

Cancellation requests must be received in writing. Full refund less 20% administration fee if cancellation is received by September 23, 2019. 50% refund if received by October 4, 2019. No refunds after October 4, 2019.

Send all cancellations to [awiesemann@ccapta.org](mailto:awiesemann@ccapta.org)

\$ _____ Total	<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMEX	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> Check made payable to CPTA
Card #:	Exp. Date:		CVV#:		
Cardholder's Billing Address:	City:	State:	Zip:		
Cardholder's Signature:	Print Cardholder's Name:				