

VOSH / International

2009 Annual Conference

Registration Form

To register, complete this form and send it along with your payment to:

VOSH/International

Charles Covington, Treasurer

111 Linda Lane

Lake Mary, FL 32746

Please make check payable to: VOSH/International

Questions? Contact Deborah Wright DeMaderios: deborah@wrightmedia.com

Title: ___ Dr. ___ Mr. ___ Ms. ___ Other: _____

First Name: _____ Last Name: _____

Accompanying Person's Name: _____

Chapter or Organization: _____

Position/Title: _____

Street Address: _____

City, State, Zip: _____

Country: _____

Telephone: _____ FAX: _____

(Include country code if outside United States)

Email: _____

Before Oct. 15 (\$95 per person): _____

After Oct. 15 (\$100 per person): _____

Student before Oct. 15 (\$80) _____

Student after Oct. 15 (\$90) _____

Total Enclosed: _____

Online registration and payment via Pay Pal are available at www.VOSH.org.

VOSH International is IRS 501 (c) (3) ID credentialed, Tax ID number is: 31-1093763