

Personal Information (Please print clearly)	
Customer Number (for returning customers): _____ Name: _____ Address (no PO box): _____ City: _____ State/Country: _____ Zip: _____ Work phone: _____ Home phone: _____ Company: _____ Email: _____ <i>(Valid email address required for purchase)</i> Fax: _____	Payment Information <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express Credit card #: _____ Expiration date: ____ / ____ (MM/YY) Signature: _____ Print cardholder's name: _____ _____ Billing address: _____ _____ <input type="checkbox"/> Company check or money order enclosed <i>(Please make checks payable to: Audio Educator)</i>
Call (866) 458-2965 for questions	

Event Title/Date (please specify): _____			
Promo/Offer Code if available (ex: EMAK2674): _____			
Item Description	Price	Qty	Total
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CD Only*			
Live Reservation plus Transcript PDF			
Transcript PDF only			
<i>* Please add \$7.95 per item shipping for CD orders</i>			
TOTAL:			

NOTE: Have you included a **valid email address** on this order form? All conference instructions and transcripts are sent via email. We cannot process your order without a valid email address. We cannot be held liable for errors due to invalid email addresses or spam filters. Please add contact@audioeducator.com to your address book.

Please check the accuracy of the above information and send the completed registration form, with payment, to the address below.

Fax completed form to **800-508-2592**

Or mail to

Audio Educator
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