

# Arizona Speech-Language-Hearing Association

## Fall Conference

October 24, 2026  
8:00 am to 3:00 pm  
Northern Arizona University  
S San Francisco Street  
Flagstaff, AZ

## Registration Form

Name: \_\_\_\_\_ Discipline/Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email (*required for CEUs*): \_\_\_\_\_

Special Needs: \_\_\_\_\_

### Payment Information

#### Indicate Track:

General  
Pediatric/Schools  
Student

Total Amount: \_\_\_\_\_

Check (*made payable to ArSHA*)

PO (*Must be accompanied by a form for each participant*)

If paying by credit card, please register online at [www.arsha.org](http://www.arsha.org).

|                               | Registration Rates |
|-------------------------------|--------------------|
| Professional SLP/AUD Member   | \$30               |
| Profession SLP/AUD Non-Member | \$60               |
| Professional SLPA Member      | \$20               |
| Professional SLPA Non-Member  | \$40               |
| Student Member                | \$0                |
| Student Non-Member            | \$15               |

All registrants will receive confirmation by email.

A full refund will be granted if the cancellation request is received on or before October 9, 2026.

#### Return Registration to:

Arizona Speech-Language-Hearing Association  
[arsha@arsha.org](mailto:arsha@arsha.org)