

Registering your **AGEHR-SPONSORED EVENT** with the Executive Director is required.
Complete, sign and forward this Registration Form as instructed below. Please print clearly.

Name of event: _____

Date of event: _____ Event Location: _____

EVENT PLANNER CONTACT INFORMATION:

Name: _____ AGEHR # _____

Mailing address: _____

Daytime phone: _____ Evening phone: _____ Fax number: _____

E-mail address: _____

EVENT PLANNING INFORMATION:

Please provide a short description of the goals for the event. You may use the back of this form to continue.

How many paid registrations do you expect? _____ How many others? _____

Registration fee(s) per registrant _____

Your marketing region _____
(Where will you advertise and promote your event - geographic region/zip codes?)

Primary clinician(s): _____

I have read and understand the Criteria for AGEHR-sponsored events and the related materials as well as the reporting requirements (completed report forms must be submitted within thirty (30) days of the event) and agree to comply with them.

Event Planner Signature Date _____

Attach all of the following: (1) Budget, (2) Mailing Label/List Request, (3) a program schedule of activities to be included in your event, and (4) a list of the music repertoire to be used in your event. Please mail them, and this registration form, after making copies for your own records to your Sub-Area/State Chair

SUB-AREA/STATE CHAIR RECOMMENDATION:

RECOMMEND APPROVAL _____ RECOMMEND DISAPPROVAL _____

Please include comments on the back of this form to support disapproval.

Sub-Area/State Chair Signature Date _____

Send all attachments and comments to Dr. Michael Mazzatenta, AGEHR AREA XI Chair-Elect, P. O. Box 20693, Mesa, AZ 85277

AGEHR AREA XI CHAIR-ELECT RECOMMENDATION:

Michael Mazzatenta, AGEHR AREA XI Chair-Elect Signature Date _____

Send all attachments and comments to AGEHR- Sponsored Events, 1055 E. Centerville Station Road, Dayton, OH 45459 or fax 1-937-438-0434.

For office use only – This event is approved for AGEHR Sponsorship. Information will be included on the AGEHR webpage and will be listed in the next publication of "Overtones." Electronic confirmation has been sent to all of the above.

AGEHR Executive Director, approval signature Date _____