



Fill out, print out & mail with payment to:

Vermont Family Network  
600 Blair Park, Ste 240  
Williston, VT 05495

You may also register by filling in your credit card info on the below form (MasterCard/Visa only) and mail/FAX to our office:

Name on card:

\_\_\_\_\_

Credit Card Number:

\_\_\_\_\_

Expiration date: \_\_\_/\_\_\_/\_\_\_  
(or call in card info: 1-800-800-4005)

Signature:

\_\_\_\_\_

**Do NOT email credit card info!**  
Email is not secure. Credit card info will be kept strictly confidential.

FAX: (802) 876-6291

*Requests for  
Special Accommodations  
should be made before April 15*

\_\_\_\_\_

\_\_\_\_\_

*or contact our Events Coordinator  
before April 15 at  
[Linda.Cruise@vfn.org](mailto:Linda.Cruise@vfn.org)  
1-800-800-4005 x 202*

## Access the Future Today! 2010 VFN Conference Registration

Please print & mail with payment *before April 15 for early discount.*

Name: \_\_\_\_\_

Mailing Address is: Home Business

Street: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_  
(for name tag)

### Check all that apply:

Educator/Para Educator Nurse MD OT/PT  
Social Worker Birth-to-3 Professional Youth Professional  
Parent/Guardian of child with a disability 0-3 years  
Parent/Guardian of child with a disability 3-18 years  
Parent/Guardian of adult with a disability  
Individual with a disability/Self-advocate  
Student Childcare Provider Other

### Sign up for: (optional)

Social Work Cont. Ed Attendance Certificate  
Mental Health Certificate

Morning Workshops 10:15 - 11:30 (check one)

1 2 3 4 5 \_\_\_\_\_  
Choice: <sup>2nd</sup>

Afternoon Workshops 2:45 - 4:00 (check one)

6 7 8 9 10 \_\_\_\_\_

### Conference Fee: (includes continental breakfast & lunch)

\$70 Early Registration (before April 15)

\$75 Registration (April 16 - May 5)

\$55 Family Member/Caregiver of person with special needs

(NOTE: A limited number of Partial & Full Scholarships are available;  
please call VFN 1-800-800-4005.)

Your name/contact info will be included on a participants list, in our conference packets, unless you state otherwise: No listing, please

Photos will be taken at the conference event. Please check here if you do NOT want your photo used in any VFN promotional material: No photos used, please

Send (non-refundable) check payable to:

Vermont Family Network  
2010 VFN Conference  
600 Blair Park Road, Suite 240  
Williston, VT 05495-7549

See workshop descriptions & other conference details at: [www.vfn.org/Conf2010.html](http://www.vfn.org/Conf2010.html)

Does your organization want to exhibit or sponsor? 1-800-800-4005 or [www.vfn.org/ConfSponExhib.html](http://www.vfn.org/ConfSponExhib.html)