

**ISNR 17th Annual Conference**  
**Current Trends in Neuromodulation: Neurofeedback, rTMS and tDCS**  
**September 3 – 6, 2009 Indianapolis, Indiana**

Name \_\_\_\_\_ Highest Academic Degree \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-Mail \_\_\_\_\_

Telephone (Voice) \_\_\_\_\_ (Fax) \_\_\_\_\_

Psychologist Psychiatrist Physician Counselor Nurse Social Worker Other \_\_\_\_\_

ISNR Member:  Yes  No AAPB Member:  Yes  No

Years of Neurofeedback Experience:  0-2  3-5  6 or more

**If you do not wish to have your name and contact information included in a directory of conference attendees please initial here.** \_\_\_\_\_

**REGISTRATION FEES: (FOR GENERAL CONFERENCE PROCEEDINGS)**

	Through August 4	After August 4	
Member of ISNR or AAPB	\$395	\$495	\$ _____
Non-Member	\$495	\$595	\$ _____
Student (US or International)	\$ 50	\$ 60	\$ _____

***First-time attendees may deduct \$40 and International***

***attendees may deduct \$100 from their registration fees. Total Discount(s) \$ - \_\_\_\_\_ TOTAL: \$ \_\_\_\_\_***

First time attendees - please enter vendor or advertisement discount code for \$40 discount \_\_\_\_\_

**PRE CONFERENCE & CONFERENCE WORKSHOP FEES:**

(Please note that prices are for full day workshops, per day)

Registrants are responsible for choosing workshops based upon content and presenter level of difficulty rating.

It is the discretion of ISNR to allow substitutions and workshop refunds are not permitted.

**PRECONFERENCE WORKSHOPS** (per day – Monday, Tuesday & Wednesday) WS#s \_\_\_\_\_

Member	\$175	\$225	\$ _____
Non-Member	\$225	\$275	\$ _____
Student	\$ 85	\$115	\$ _____

**CONFERENCE WORKSHOPS** (per workshop - Thursday through Sunday) WS#s \_\_\_\_\_

Member	\$ 75	\$110	\$ _____
Non-Member	\$100	\$135	\$ _____
Student	\$ 35	\$ 55	\$ _____
Free Vendor Seminars (Mon. 9/07/09)	\$ 00	\$ 00	WS # _____

**Sat. PM Banquet** tickets are included in your registration fee. Will you attend the banquet?  YES  NO

Additional Banquet Tickets for guests @ \$35 each \$ \_\_\_\_\_

CEs through Amedco \$ 45 \$ \_\_\_\_\_

CMEs through Amedco \$ 85 \$ \_\_\_\_\_

**TOTAL GENERAL CONFERENCE, WORKSHIP, EXTRA BANQUET AND CE FEES** \$ \_\_\_\_\_

Fees may be paid by check, credit card or money order and made payable to "ISNR"

***(For information regarding financial assistance or volunteer opportunities contact the ISNR office at***

***1-800-847-4986 or [annmarie@isnr.org](mailto:annmarie@isnr.org)***

**CREDIT CARD AUTHORIZATION (Circle One): VISA MASTERCARD AMEX**

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Name Shown on Card: \_\_\_\_\_ cvv: \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Signature of Card Holder (Black ink please): \_\_\_\_\_

**MAIL THIS FORM TO:**

ISNR 2009 Conference Registration

14493 S. Padre Island Drive, Suite A, PMB 257

Corpus Christi, TX 78418

**FAX THIS FORM FOR**

**CREDIT CARD ORDERS ONLY TO:**

1-361-949-4820

Need more information or have questions? [annmarie@isnr.org](mailto:annmarie@isnr.org) or Phone: 1-800-847-4986 or 1-361-949-1738

***Cancellation Policy: 90% refund through August 4, 2009; 75% refund after August 4, 2009***