



March 11 – 13, 2011
Dallas, Texas

Para-Optometric Registration

REGISTER ONLINE at www.SWCO.org or copy this form once for each person registering and fill out and fax to 713-743-6541. For more information call: 713-743-1856

Registrant #1: _____

Professional Title (Mark "X" if certified)

C POT C POA C PO ABOC NCLE Other

Registrant #2: _____

Professional Title (Mark "X" if certified)

C POT C POA C PO ABOC NCLE Other

Office Phone: _____ Office Fax: _____

Office Address: _____

City, State, Zip: _____

Email address: _____

State(s) of Licensure: State ___ # _____ State ___ # _____ State ___ # _____

Registration Categories

	Early (Up to Feb 13)	Online (Feb 14 – Mar 6)	OnSite (After Mar 7)
<input type="checkbox"/> Para-Optometric	\$ 95	\$120	\$150
<input type="checkbox"/> Exhibit Hall Only	\$ 35	\$ 35	\$ 35
<input type="checkbox"/> Improv Tickets (ADULTS only)	\$ 20	\$ 20	\$ 20

Refund Policy: If you are unable to attend SWCO 2011 Conference after registering, please send a written request for reimbursement within 1 week of the conference start. A processing fee of \$40 per person applies to all refunds.

- Visa
- Mastercard
- Check (Mail In)

Total: _____

Account #: _____

Exp. Date: _____

Signature: _____

EARLY PRE-CONGRESS REGISTRATION THROUGH THIS OFFICE MUST BE RECEIVED BY FEBRUARY 13, 2011 (Your check or credit card information **must** be enclosed)

A mailed in registration for SWCO Congress must be postmarked no later than March 1st to assure proper crediting of payments.

PLEASE RETURN THIS FORM TO:

SWCO
505 J. Armistead Bldg.
Houston, TX 77204-2020

OR FAX TO: 713-743-6541

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