

SPF 2017 ANNUAL CONFERENCE

June 23 - 25

Save
the Date

ATLANTA AIRPORT MARRIOTT GATEWAY
2929 CONVENTION CENTER CONCOURSE,



ATLANTA, GA

Hotel Registration: Mention "SPF" for discounted room rate of \$119 and \$8 self-parking, Call (404) 763-1544 Atlanta Airport Marriott Gateway. **Conference Registration:** Pay Online or Make Check Payable: SP-Foundation Mail to: 1605 Goularte Place, Fremont, CA 94539. Questions, please email SPFKentucky@gmail.com

SPF SPASTIC PARAPLEGIA FOUNDATION, INC.

Research / Education / Support

HEREDITARY SPASTIC PARAPLEGIA
PRIMARY LATERAL SCLEROSIS

www.sp-foundation.org

Tentative Agenda

June 23, Friday

1:pm Welcome
1:30pm - Breakout Sessions
5:30pm - Welcome Reception (cash bar)
6:30pm - Dinner, plated

June 24, Saturday

7:30am - Breakfast, plated
8:30am - General Session, Panel
9:00am - Kid's Day Excursion to Atlanta Zoo
12:Noon - Lunch, plated
1:45 pm - General Session, Breakout Sessions
5:00pm Social Mingle (on your own)
6:pm - Dinner (on your own)

June 25, Sunday (Add-on Cost)

Excursion to Georgia Aquarium (must prepay, preregister, para- transportation provided by MARTA)

Registrant Name#1: _____ Disorder: N/A ___ HSP ___ PLS ___ SP ___ ALS ___ Other ___

Registrant Name #2: _____ Disorder: N/A ___ HSP ___ PLS ___ SP ___ ALS ___ Other ___

Child Name #1: _____ Age: _____ Disorder: N/A ___ HSP ___ PLS ___ SP ___ ALS ___ Other ___

Child Name #2: _____ Age: _____ Disorder: N/A ___ HSP ___ PLS ___ SP ___ ALS ___ Other ___

Address: _____

Mobile Phone while in ATL: (____) _____ Text?: Y / N 2ND: Mobile: (____) _____ Text?: Y / N

E-mail: _____

(1) Are you registered in your home state with para-transportation services? ____ If yes, ask your local paratransit services to fax "Visitor's Status" information to ATL MARTA Mobility at 404-848-6900 if you are attending the Zoo (child) ____ (y/n) or Aquarium (Adult/Child) ____ (y/n). (2) If not previously registered with para-transit services, while in Atlanta, are you attending the Zoo (child) ____ (y/n) or Aquarium (Adult/Child) ____ (y/n). (3) Will a companion join you? ____, If yes, please attach a registration form for the companion. (4) What aids are you likely to use in ATL? Check all that apply: Cane ____ Crutches ____ Walker ____ Scooter ____ Wheelchair ____ Powerchair ____ Animal ____ Other ____ (5) Meal Requirement: Regular ____ Vegetarian ____ Food Allergies ____ (6) Are you driving or flying to ATL? ____

Registration Fees: SPF Donation \$ _____

QTY: ____ @\$100 per adult (\$110 after 5/20/17) (1-day rate \$80) \$ _____

QTY: ____ @\$70 per child (age <18-yrs old) (\$80 after 5/20/17) \$ _____

(Conference Fee includes: Friday Dinner; Saturday breakfast, lunch, and snacks during breaks)

Saturday Kid's Day Excursion to Atlanta Zoo includes lunch & para-transit (must pre-register)

QTY ____ @\$0 Child (3-11) / QTY ____ @\$21 Adult (12+) \$ _____

Sunday Optional Excursion: Georgia Aquarium includes para-transit

Adult QTY ____ @\$34.51 / Children(3-12) QTY ____ @\$29.11 / Seniors(65+) QTY ____ @\$31.27 \$ _____

Total Fees Enclosed \$ _____