



SOUTHEAST ATHLETIC TRAINERS' ASSOCIATION, INC.
34th Annual SEATA Clinical Symposium & Members Meeting
March 19-22, 2009 – Panama City Beach, FL



Pre-registration for our District IX meeting in Panama City Beach, FL is \$105.00 for everyone pre-registering except students (\$70.00) and non-NATA members (\$155.00). Pre-registration is encouraged so we can have an accurate count of those attending in order to plan ahead and reduce costs. To qualify for the pre-registration price, online registration <https://www.SignUp4.net/Public/ap.aspx?EID=SEAT36E> must be submitted by Tuesday, March 10, 2009. Online registration is strongly encouraged. If you choose to send a check or register as a group, please register online and mail a list of the names registered or a copy of your registration confirmation with your check to Jim Mackie, SEATA Treasurer, 12133 Cheyenne Trail, Jacksonville, FL 32223. Registration forms at www.seata.org/09csmmeg.doc or www.seata.org/09csmmeg.pdf submitted via US postal service must be postmarked no later than midnight, Tuesday, March 3, 2009. All registrations submitted after this time will be charged the on-site fee as listed below. [SEATA Refund Policy](http://www.seata.org/refund.htm) at www.seata.org/refund.htm [SEATA Website Privacy Policy](http://www.seata.org/privacy.htm) at <http://www.seata.org/privacy.htm>

REGISTRATION FORMS MUST BE POSTMARKED BY MARCH 3, 2009.

Individuals who have not registered by March 3rd by mail or March 10th online must register on-site.

Please type or print. (Form may be completed on the computer before printing by typing in each cell)

Salutation	Last Name	First Name	Middle Initial	Badge Name	Suffix
Employer/School			Title		
Work Mailing Address (Street Address or Post Office Box)					
City	State	Zip	Primary Phone Number	Secondary Phone Number	
Primary Email address			Cell Phone Number	Fax Number	
NATA Membership Number (Required)			Certification Number		

SPOUSE/FAMILY NAMES, if attending and not registering separately: _____

	SYMPOSIUM REGISTRATION	PRE-REGISTRATION	ON-SITE	TOTAL
NATA MEMBER:				
Certified Athletic Trainer		\$105.00	\$130.00	_____
Associate		\$105.00	\$130.00	_____
Student/Certified		\$70.00	\$80.00	_____
Student/Non-Certified		\$70.00 (\$55.00 if attended 2009 SEATA Student Symposium)	\$80.00	_____
NATA or SEATA Hall of Fame/Retired/Honorary		No Fee	No Fee	_____
Hall of Fame Inductee Guest		No Fee	No Fee	_____
Invited Speaker		No Fee	No Fee	_____
NON-NATA MEMBER		\$155.00	\$200.00	_____

	MINI-COURSES		PRE-REGISTRATION	ON-SITE	TOTAL
MINI-COURSES	Friday (Mini-course 1: 8:00-9:30 A.M.)	1) Foot and Ankle Evaluation	\$25.00	\$30.00	_____
	Saturday (Mini-course 2: 6:30-8:00 A.M.)	2) Dynamic Flexibility	\$25.00	\$30.00	_____
	Saturday (Mini-course 3 & 4: 2:45-3:45 P.M.) – Chose only one)	3) Laser Therapy	\$20.00	\$25.00	_____
		4) Reaching the Millennial Student	\$20.00	\$25.00	_____
	Sunday (Mini-course 5: 6:30-8:00 A.M.)	5) Evidence Based Management for Acute Wounds	\$25.00	\$30.00	_____

SEATA	Participant – Complimentary	# of Tickets: _____	TOTAL #	
AWARDS	Spouse- \$20.00	# of Tickets: _____	TICKETS	
LUNCHEON	Other Family Tickets - \$20.00 Each	# of Tickets: _____		

NATA RESEARCH & EDUCATION FOUNDATION DONATION
 Please indicate the amount of your desired donation and add to total _____

METHOD OF PAYMENT	Cash _____	Check _____	Credit Card _____	MC _____	Visa _____	Discover _____	TOTAL ENCLOSED
Name on card _____	Credit Card# _____	Exp Month _____	Year _____				
Card ID# 3 digit non-embossed number on back of card _____	Signature _____	Date of Payment _____					

FOR OFFICE USE ONLY	DO NOT WRITE	Date Received _____	Check # _____	Amount Received _____
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