

GEORGIA ATHLETIC TRAINERS' ASSOCIATION, INC. ANNUAL SYMPOSIUM REGISTRATION FORM

JANUARY 13-14, 2012

**WYNDHAM PEACHTREE CONFERENCE CENTER
2443 Highway 54 West, Peachtree City, GA 30269**

For Room Block Reservations please call 770.487.2000

Registration must be postmarked by December 31, 2010. Registrations not postmarked by the deadline *will be charged the onsite fee.* Those who have not registered by this date must register on-site. Refunds will only be given if you contact the GATA Secretary in writing at tortoricejm@resurgens.com at least 72 hours in advance.

Name _____
First M.I. Last Name for Badge

Mailing Address _____
Street Address

City State Zip Code

Preferred Email Address _____

Institution/Employer _____

Symposium Registration	Pre-Registration GATA Member	Pre-Registration Non-GATA Member	ON-SITE	TOTAL
<ul style="list-style-type: none"> • Licensed/Certified Member • Physician/Allied Health NATA Member # _____ Georgia License # _____	\$105.00	\$150.00	\$160.00	\$ _____
<ul style="list-style-type: none"> • DAY PASS (circle one) Friday / Saturday	\$55.00	\$90.00	\$100.00	\$ _____
<ul style="list-style-type: none"> • Speaker/Award Winner • GATA Hall of Fame Member 	NO FEE NO FEE	NO FEE NO FEE	NO FEE NO FEE	No Fee
Awards Dinner <ul style="list-style-type: none"> • Participant – Complimentary • Spouse/Guest - \$20.00 each <i>(Award winners are allowed up to 4 guests at no charge)</i> 	Tickets 1 Tickets _____	Tickets 1 Tickets _____	Tickets 1 Tickets _____	\$ _____
Old Fashioned GATA Social January 14, 2010	\$10.00	\$10.00	\$10.00	\$ _____
Payment Type Cash () Check ()		Make Checks Payable To: GATA, Inc.	For Office Use Only Date Rec'd _____ Amt Rec'd _____ Check # _____	TOTAL ENCLOSED \$ _____

Please complete the pre-registration form and mail to:

tortoricejm@resurgens.com
 Jamie Tortorice
 6615 North Glen Drive
 Cumming, GA 30026