

# REGISTRATION | Fees You can also register online at [www.abh-abnlp.com](http://www.abh-abnlp.com)

## Conference Registration Form

Please fill out one form for each participant. Copy form for additional participants. Tickets are non-refundable once purchased.  
 Fax: 702-436-3267 (credit card only) Toll Free: 888-823-4823 (credit card only) Direct: 702-456-3267 (credit card only)  
 Mail checks payable to ABH to: American Board of Hypnotherapy, P.O. Box 531605, Henderson, NV 89053

### Pre-Conference 2-Day Workshops | Thursday and Friday | 9:00 am - 5:00 pm

Select one workshop:

- Tad and Adriana James | "The Secret of Creating Your Future®"
- David Shephard | "Presenting Magically"
- Casey Truffo | "How To Build a Full and Rewarding Private Practice with Self-Paying Clients"

Fees:  Member (Sent by 1/5/09) **\$170.00** |  Non-Member or Member (After 1/5/09) **\$195.00**

**Friday Evening Reception includes Hors d'oeuvres**

### Main Conference | Saturday and Sunday | 8:30 am - 5:45 pm

**SATURDAY 8:30 am - 10:30 am** Opening Speaker Shelley Stockwell-Nicholas

**SATURDAY** Select one workshop for each time slot:

**10:45 am - 12:00 pm**

- Chris Attwood
- Tad and Adriana James
- Dick Sutphen

**1:30 pm - 2:45 pm**

- Vicky Thomas
- Kim Redman
- Casey Truffo

**3:00 pm - 4:15 pm**

- Dr. Bee Epstein-Shepard
- David Shephard
- Shelley Stockwell-Nicholas

**4:30 pm - 5:45 pm**

- Carolyn McCormick
- Robyn Levin
- Chuck Tramont

**SUNDAY 9:00 am - 10:30 am** Opening Speakers David Shephard, Tad and Adriana James, Dick Sutphen

**SUNDAY** Select one workshop for each time slot:

**10:45 am - 12:00 pm**

- Shelley Stockwell-Nicholas
- Kim Redman
- Byron Sabol

**1:30 pm - 2:45 pm**

- Wayne Perry
- Tad and Adriana James
- Emma James

**3:00 pm - 4:15 pm**

- Dick Sutphen
- David Shephard
- Richard Habben

**Saturday and Sunday Morning includes Coffee, Tea and Breakfast**

Fees: **Member**  **FREE Saturday & Sunday Only**

**(20% off next renewal if you register by 1/15/09)**

**Non-Member**  (Sent by 1/5/09) **\$300.00** |  (Sent after 1/5/09) **\$350.00**

**Dinner** Including Entertainment  **\$50.00 (Optional)**

**TOTAL ENCLOSED:** \_\_\_\_\_

### BILLING INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
As it appears on your card As it appears on your card

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

### PAYMENT INFORMATION

Check  Money Order  Credit Card  *Make checks or Money Orders payable to: ABH*

Credit Card Information: Type: MasterCard  VISA  AMEX

Credit Card # \_\_\_\_\_ Security Code \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Signature: \_\_\_\_\_

Membership # \_\_\_\_\_ Expiration Date: \_\_\_\_\_