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2019 DIR-Floortime® Conference

A Developmental Relationship-Based Model for Children and Families with Autism June 13th – June 14th • Raleigh, NC

Single Registration Form

Please note, this is the Individual Registration Form. If you are registering as a group (3 or more people), you qualify for a discounted rate of \$255, per registrant, until May 13th. If you would like to register as a group, please visit www.PediatricPossibilities.com. Please complete the following:

Full Name:			
First Name Last Name			
Address:		_	
Street Address		Street Address Line 2	
City	State	Postal/Zip Code	 e
Email:			
A receipt of registration and p	ayment will be sent to thi	is email	
Phone Number: -			
Phone Number: Ph	one Number		
Profession:			
i.e. occupational therap	oist, psychologist, parent,	, etc.	
Organization:			
Organization: Name of company or	organization you work for	r (if applicable)	
Registration Fees:			
Early Bird (\$275/registrant	- only available until N	/lay 13 th)	
Regular (\$295/registrant)			
			Mail Payment and Registration Form to:
Total Payment Included: \$			Pediatric Possibilities 7209 Creedmoor Rd. Suite 101
Checks can be made payable to:			Raleigh, NC 27613
Pediatric Possibilities			

Note: Please include "Floortime Conference" on the check memo line.