



National Association of Therapeutic Schools and Programs

# 2025 Wilderness Symposium and Utah Regional Conference

June 2-4  
Zermatt Resort - Midway, UT

## Attendee Info

First/Last Name: \_\_\_\_\_

Pronouns: \_\_\_\_\_ Would you like your pronouns listed on your badge? \_\_\_ Yes \_\_\_ No

Job Title: \_\_\_\_\_ Credentials/Professional Designation: \_\_\_\_\_

Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_

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Please list any dietary restrictions, including food allergies: \_\_\_\_\_

I need special accommodations to participate in this program: (please outline below)

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Is this your first time attending a NATSAP Conference?

- Yes
- No

## **\*Conference Recording Policy**

To register for this event you must read and agree to abide by the following policy: Participants are not permitted to record any conference sessions or discussions (with any audio, video, note-takers, transcribers, or AI bots/software). If a participant requires a recording for accessibility purposes, they must obtain advance approval from NATSAP's Director of Community Events ([stephanie@natsap.org](mailto:stephanie@natsap.org)) and retain the recording for their private use only.

I have read and agree that I will abide by NATSAP's Conference Recording policy.

## Registration Fees

	Until April 11	April 12-May 23	On-site
Program Member Rate	<input type="checkbox"/> \$215	<input type="checkbox"/> \$250	<input type="checkbox"/> \$275
Individual/Affiliate Member	<input type="checkbox"/> \$215	<input type="checkbox"/> \$250	<input type="checkbox"/> \$275
Rate Non-Member Rate	<input type="checkbox"/> \$315	<input type="checkbox"/> \$350	<input type="checkbox"/> \$375
Presenter Rate	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0	

**\*\*NATSAP GROUP DISCOUNT** - Members of NATSAP programs are eligible to receive a group registration discount. Every SIXTH registrant (of the same program) are eligible for the 50% discount. To take advantage of this discount, register your first FIVE staff members and then email [events@natsap.org](mailto:events@natsap.org) with the name(s) of those staff members to receive the 50% off for the sixth staff member, or complete the GROUP REGISTRATION form. You must be listed as a member in the current NATSAP membership directory in order to receive the discount.



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## Payment

Check Enclosed - Please list check number: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Credit Card Billing Zip Code (**required**) \_\_\_\_\_

Name as it appears on Credit Card: \_\_\_\_\_

Email address of card holder (for receipt): \_\_\_\_\_

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

Please do not send registrations after May 23rd. If you want to register after this date, you must do so ON-SITE at the conference.

**Substitution Policy:** If a registrant is unable to attend this event for any reason, they may substitute someone else from the same organization for no change fee. On-site substitutions will be allowed for no fee.

**Cancellation Policy:** If an individual wishes to cancel his or her registration for the 2025 Utah Regional Conference, please inform the conference organizers in writing, by May 9th. **NO REFUNDS** will be issued after May 9th. Attendee substitutions are allowed at any time.

*Please email [events@natsap.org](mailto:events@natsap.org) if you do not receive a confirmation email within 7 days of sending your registration form.*

*National Association of Therapeutic Schools and Programs (NATSAP)*

*16701 Melford Blvd, Suite 400*

*Bowie, Maryland 20715*

*Phone (301) 986-8770*

[www.natsap.org](http://www.natsap.org)

[events@natsap.org](mailto:events@natsap.org)