



Texas Society for Advancement of Health Professions Annual Conference Registration Form September 17-18, 2026

Name:

Agency/Organization/University:

Street Address

City/State/Zip

Telephone (AC + Number)

Email address (required):

Registration Fee: (includes afternoon break, reception and awards dinner, and continental breakfast)

	Registration (Before 9/15/26)	Late Registration (After 9/15/26)
Members & Presenters	\$100	\$125
Non-Member	\$100	\$125
Awards Dinner* for Guest Only	\$ 30	\$ 30
Students	\$ 25	\$ 25

Total Amount Enclosed:

\$

Students. Registration fee includes cost of meals (dinner, breaks, and box lunch on Fridays). Students must complete and submit this registration form to confirm attendance, and clearly mark meals attending.

Awards Dinner. Yes No

The dinner is on Thursday evening and included in your registration fee. Please confirm your attendance on this form for catering purposes. If you would like to bring a guest, the price is listed above. For special accommodations or dietary needs, contact Shirley McGraw by 9/11/26. Onsite registration may have limited availability.

Friday Box Lunch. Yes No

All conference participants including presenters and students must submit conference registration form. Conference registration is non-refundable.

Fee Payment: Check: # (Payable to: TSAHP)

Credit Card: Master Card Visa Discover American Express

Account Number:

Expiration

Billing Zip

Name on Card:

Code (on back of card)

SUBMIT completed registration form to: [TSAHP Online Portal](#).

Questions:

Shirley McGraw, Executive Director
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