



4th Annual CSA Dietitian Day

October 29, 2009

Registration Form

Print Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone (required): _____ - _____ - _____ E-mail: _____

This program is reserved for dietitians and other medical professionals.

Dietitian Day Objectives:

At the conclusion of the program participants will be able to:

1. Describe the pathophysiology of celiac disease
2. Define medical nutrition therapy for celiac disease
3. Identify at least two management strategies for celiac disease
4. Describe the relationship between type 1 diabetes mellitus and celiac disease

Program & Speakers:

7:30 am – 7:55 am Registration & Information Desk
 7:55 am – 8:00 am Welcome
 8:00 am – 9:15 am **Jean Guest, PhD, RD, LMNT**
 9:15 am – 10:30 am **Dee Sandquist, MS, RD, CDE**
 10:30 am – 11:00 am Morning Break
 11:00 am – 12:00 pm **Veronica Alicea, RD, MBA**
 12:00 pm – 1:30 pm Gluten-Free Lunch
 1:30 pm – 2:45 pm **Mark Dinga, MEd, RD, LDN**
 2:45 pm – 3:15 pm Afternoon Break
 3:15 pm – 4:30 pm **Diana Stuber, MA, RD, CDE**
 4:30 pm – 5:30 pm **Evaluation/Exhibit Hall**

Early Registration Fee \$165 Until 10/12/09

Late Registration Fee \$215 After 10/12/09

Registration includes lunch, Dietitian Day Handbook, speaker presentation recordings set, a compact disk version of *The CSA Gluten-Free Product Listing* and admission to the Conference Exhibit Hall.

Register by phone 1-877-CSA-4-CSA.

Seminar Location

Bayfront Convention Center - Erie, Pennsylvania

Accommodations Reservations

Sheraton Erie Bayfront Hotel - Erie, Pennsylvania

- Identify yourself as part of the Celiac Sprue Association September 29, 2009 will be the last day for CSA Conference discounted room rates. Phone: 814-454-2005

Continuing Education

CPEU's are being applied for through the American Dietetic Association's Commission on Dietetic Registration.

I have specific dietary needs (gluten-free lunch and breaks)

Lactose-free Vegetarian

"Oktoberfest" Buffet

Continue the experience by enjoying delicious gluten-free selections. \$40.00

Conference Exhibit Hall

Conference Exhibit Hall will feature a variety of gluten-free items from food manufacturers, suppliers and health food stores many offering products for sampling or purchase.

Photo/Video Statement

By attending this event it is agreed that photos/videos may be taken and used by CSA for promotional and educational purposes.

Special Assistance

CSA adheres to the articles of Title III of the 1990 Americans with Disabilities Act. If special assistance is required, notify CSA by 9/1/09.

		#	First and Last Names of Participant(s)	Amount
Early Registration - Until 10/12/09	\$165.00	x____		\$
Late Registration - After 10/12/09	\$215.00	x____		\$
"Oktoberfest" Buffet	\$40.00	x____		\$
Total				\$

Payment method: Check: Amount (Payable to the Celiac Sprue Association) _____

Credit card:

Provide Security Code:	Visa	Discover	MasterCard	American Express

Credit card number: _____ Exp. Date: _____

Full name of cardholder (Please Print): _____ (Signature): _____

No refunds will be issued once payment has been received. Forfeited fees will be retained as a donation to CSA.