



KHS

2026 Kansas Hearing Society Save-the-Date & Early Registration

Spring Conference Dates: March 5th & March 6th, 2026

**NEW LOCATION: HYATT REGENCY,
400 W. Waterman Wichita, Kansas 67202**

TITLE: What's Under the Hood, AI?..

**Dynamic Speakers, including Stelios Dokianakis, Au.D., Holland Doctors of Audiology
Diana Ackerman, Au.D., WSA Audiology, & more!**

Cocktail Hour & View Exhibits & Auction Items

Manufacturer/Audience Interactive Session

Easy Reservations: (316) 392-6028 & ask for KHS Rm Rates \$149.00

Room includes: breakfast, free Wi-Fi.

Check your selection below

**A voluntary donation box is included with
Your registration form below.**

Members – Voting and Affiliate

- ☐ Renewing and Attending Conference \$325
- ☐ Renewing and Not Attending Conference 75
- ☐ Reactivate Membership & Attending 335
- ☐ Joining KHS (Includes Conference fee) 350

Members – Licensed Exempt Dispensing Audiologists

(Working Only For Any Government Agency)

- ☐ Renewing and Attending Conference \$150*
- ☐ Renewing and Not Attending Conference 60
- ☐ Reactivate Membership & Attending 195
- ☐ Joining KHS (Includes Conference fee) 200

- ☐ Non-Member Conference Attendance \$375*
- ☐ Joining KHS (Includes Conference fee) 350
- ☐ Audiology Student – Not Licensed 0
- ☐ Extra Friday Luncheon Ticket \$25
- ☐ Request a Vegetarian Lunch

***Add \$50 if paying after Feb. 25,**

☐ voluntary donation

Total Amount \$ _____

Fax to: (316) 928-2068

Mail to: Kansas Hearing Society
2812 E. Menlo, Wichita, KS 67211

Date: _____

Paid by Check # _____

Paid by Credit Card (Check type)

☐ VISA ☐ MASTERCARD ☐ DISCOVER

(Please add \$10.00 for processing fee if paying by credit card)

CC# _____

Expiration Date (MM/YY) ____ - ____ **3 digit Security code** _____

Please complete all fields below including preferred e-mail

****If you are an IHS member then include last 4 of social security #:**

Signature _____

Print Name _____

E-Mail _____

Last 4 of SS #: _____

Business Name _____

Address _____

City, State, Zip _____

Business Phone _____ **Fax** _____