

SSAASA 8

DECEMBER 5-7, 2025

HYATT REGENCY DULLES * 2300 DULLES CORNER BLVD. HERNDON VA 20171

HOSTED BY AREA 71 VIRGINIA

Name:	Name for badge:	Area #:
Address:	City:	State: Zip:
Phone #:	Email:	
Accessibilities/Special N	leeds: Please specify:	
Preferred method of con	nmunication (check all that apply): [] Ca	ll [] Text [] Email
Current service position	:	
[] Secretary [] Treas [] Other: [] I would like to be conta	(check all that apply): [] GSR [] urer [] Treatment [] Corrections [cted about volunteer opportunities at SSA e to the SSAASA scholarship fund to help	[] PI/CPC [] Accessibilities ASA 8
Total enclosed: \$		

Mail completed form and check (if applicable) to:

SSAASA Steering Committee PO BOX 2694 Woodbridge VA 22195

For more information or any questions, please email: chair@ssaasa.com