

MCRA CONVENTION REGISTRATION

April 21 through 23, 2017

Hotel Sorella, 901 West 48th Place, Kansas City, Missouri 64112
Reservations – 866-842-0100 www.hotelsorella-countryclubplaza.com
Group/Block Promo Code: 1704MISSOU

PLEASE MAIL THIS REGISTRATION PAGE, ALONG WITH CHECK OR CREDIT CARD INFO TO:
Ms. Gail Conaway, Treasurer, 13808 N.E. 187th Street, Holt, MO 64048

Please Register by March 15, 2017 (On-site registrations will be charged an additional \$25.00)

Registration Information (Please print legibly)

Name: _____
Name to be printed on badge: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Work Phone: _____
Company or Courthouse: _____
E-Mail: _____
CCR#: _____ RPR#: _____ CVR#: _____ Software: _____

ATTENDING ONE DAY: Saturday Sunday

Reporter Member \$175
 Reporter Non-Member \$200
 Associate Member \$150
 Retiree/Honorary (pay cost of meals. Please indicate Under "Guests" which meals you are paying for)

ATTENDING TWO DAYS

Reporter Member \$225
 Reporter Non-Member \$250
 Associate Member \$200
 Retiree/Honorary (pay cost of meals)
 Student

Sponsor A Student! \$50

 Missouri CRR Examination \$75 * Must be member of MCRA in good standing to attain and keep the MO-CRR designation

Guests

of Guests Friday Night Event (\$35.00)
 # of Guests Saturday Breakfast (\$15.00)
 # of Guests Saturday Luncheon (\$30.00)
 # of Guests Sunday Breakfast (\$15.00)
 _____ Total Enclosed for Guest Meals

Please include Guest Names

Guest 1 _____
Guest 2 _____

Tentative Convention Planner (Points are pending approval.)

(Please indicate events you plan to attend)

<input type="checkbox"/> Friday Night (Event to be Announced)		
<input type="checkbox"/> Saturday	Breakfast Buffet	7:30-8:30
<input type="checkbox"/> Saturday	Boston Marathon	8:30-10:30 (2.0/.20)
<input type="checkbox"/> Saturday	Technology	10:45-12:15 (1.5/.15)
<input type="checkbox"/> Saturday	Business Luncheon	12:30-1:45
<input type="checkbox"/> Saturday	Project Innocence	2:00-3:30 (1.5/.15)
<input type="checkbox"/> Saturday	Mark Woodworth Trial	3:45-5:15 (1.5/.15)
<input type="checkbox"/> Saturday	Social	5:30-7:00
<input type="checkbox"/> Sunday	Breakfast Buffet	7:30-8:30
<input type="checkbox"/> Sunday	CRR Exam	8:00-9:00
<input type="checkbox"/> Sunday	Software Breakout (Eclipse, CaseCATalyst, Dragon)	8:30-10:30 (2.0/.20)
		10:45-12:45 (2.0/.20)

Registration Fee \$_____ + Guest Fees \$_____ + CRR Fee _____ + Friday Night Event (\$35.00) \$_____

+Sponsor a Student \$_____ **Total Enclosed \$_____**

Payment Method: Check No. _____ (Please make check payable to **MCRA**)

Credit Card: Visa MasterCard

Card No. _____

Three digit security code on back _____

Expiration Date: Month _____ Year _____

Signature for Authorization _____

Payment Must Accompany Registration Form **OR** **Register and make payment at Mocra.org**