

# MEMSPA ANNUAL CONFERENCE

December 6-8, 2017  
Grand Traverse Resort—Traverse City, MI

## Participant Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title: \_\_\_\_\_ School Name: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ School Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ District: \_\_\_\_\_

Badge Name: \_\_\_\_\_ Guest Name: \_\_\_\_\_

I have attended the MEMSPA Conference \_\_\_\_\_ times.

**MEMSPA will retain \$39 for ALL cancelled registrations or 50% of fees for cancellations received after 11/23/17.**

|   | Registration Fee | Early Registration<br>(before 11/08/16) | Paid registration includes meal tickets. If you need extra tickets for guests you may purchase them here: |
|---|------------------|---|---|
| <b>Members</b>  | <u>  \$349</u>   | <u>  \$289</u>                          |   |
| <b>Non Members</b>  | <u>  \$425</u>   | <u>  \$365</u>                          |   |
| <b>(2 Lunches, 2 Breakfasts, &amp; Banquet included)</b>                                |                  |   |   |
| <b>Dietary Restrictions:</b> _____  |                  |   |   |
| <b><u>MEMSPA Retiree Member—No Registration Fee</u><br/>(Meal tickets not included)</b> |                  |   |   |

## **PAYMENT INFORMATION**

Total Amount Due: \_\_\_\_\_

Purchase Order # \_\_\_\_\_ (PO# must be included on registration form for processing)

Check Enclosed (Make checks payable to MEMSPA.)

**CREDIT CARD** (MC/VISA/American Express/Discover) Security Code: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Card # \_\_\_\_\_ Billing Address: \_\_\_\_\_

Name as it appears on card

Signature

## **THREE EASY WAYS TO REGISTER:**

#1: Register online at [www.memspa.org](http://www.memspa.org)

#2: 24-hour Fax Line: 517.694.8945—Credit card and Purchase Orders Only

#3: Mail to: MEMSPA Registration—1980 N College Road, Mason MI 48854

**QUESTIONS?? Call 800.227.0824**