

**Registration Form (Complete one form per person. More event info:** [**www.msassn.org**](file:///C%3A%5CUsers%5CDee%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5COWZ4Y50P%5Cwww.msassn.org)**)**

**Contact Information:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ST\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check here if you require special services \_\_\_\_\_

**Registration Information: Schedule of Events:**

Tabletop Exhibit Hall Admission $10 \_\_\_\_\_\_\_\_ **Thursday, September 21**

Happy Hour in Exhibit Hall Free\* \_\_\_\_\_\_\_\_ 4:00-7:30 pm - Exhibit Hall Open

Morning Refreshments Free\* \_\_\_\_\_\_\_\_ 6:00-7:30 pm – Happy Hour in Exhibit Hall

Seminar-*Skills School for* **Friday, September 22**

 *Professional Development* $20 \_\_\_\_\_\_\_\_\_ 8:30 am-2:30 pm – Exhibit Hall Open

Afternoon Refreshments Free\* \_\_\_\_\_\_\_\_\_ 8:30-9:30 am – Morning Refreshments in

Seminar-*Tactical “To-Do” List: Make* Exhibit Hall

 *Your Professional Life Work* $20 \_\_\_\_\_\_\_\_\_\_ 10:00-11:00 am – Seminar-*Skills School for*

\*Free events require registration; space is limited. *Professional Development*

**Total**: $\_\_\_\_\_\_\_\_ 12:00-1:00 pm – Afternoon Refreshments in

 Exhibit Hall

 2:30-3:30 pm – Seminar-*Tactical “To-Do” List:*

 *Make Your Professional Life Work*

**How to Register:**

EMAIL: DeeMSA@cinci.rr.com; MAIL: MSA, 4128 Woodsly Dr., Batavia OH 45103;

QUESTIONS: MSA, 513-753-8664

**Payment Information** (payable to MSA in US dollars only):

Credit Card Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CSV\_\_\_\_\_\_\_\_ Expiration date\_\_\_\_\_\_\_\_\_\_\_ Amount authorized $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (as it appears on card)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip code card billed to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_