

CMSA of Eastern OK 2016 Attendee Conference Registration



Attendee Contact Information Date _____

Name: _____ Title/Credentials _____

Employer/Company Name: _____ CMSA Member ID # (must be included for member pricing)
 _____ Member ID #: _____

Address: _____ City: _____ State: _____ Zip _____

Phone: Home /Cell/ Work (circle one) _____ Fax Number (____) _____

Email Address _____

REGISTRATION OPTIONS

	Pricing On or After April 15, 2016	Early Bird Pricing. Before April 15, 2016	Total
CMSA Member (prepayment)	\$95.00	\$75.00	
CMSA Non-Member (prepayment)	\$120.00	\$100.00	
Payment at the Door	\$135.00		
Exhibitor Booth--Member	\$390.00	\$375.00	Information only —Please complete a booth registration form.
Exhibitor Booth-Non-Member	\$600.00	\$550.00	
Luncheon only	\$35.00		

All Attendees desiring CEU's must complete an Attendee Registration form TOTAL: \$ _____

METHOD OF PAYMENT:

Check payable to: CMSA of Eastern OK Visa MasterCard Discover

Corporate Sponsor Attendee Complimentary Booth Attendee

_____ (Name of Sponsor)

CMSA Scholarship Attendee (Please Check box above & list your Corporate Sponsor or your Booth Sponsor)

CMSA of Eastern OK Tax ID # is: 83-0505533 Board Member Speaker Attendee

CREDIT CARD # _____ Exp Date _____

AUTHORIZED SIGNATURE: _____ DATE: _____

RETURN FORM & PAYMENT TO: You can register by faxing to # at the right, or by mailing to address below.

Registration should include payment.

CMSA OF EASTERN OKLAHOMA
PO BOX 35766
TULSA, OK 74153

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FAX: (918) 488-8021
EMAIL: info @cmsa-easternok.org
WEBSITE: www.cmsa-easternok.org