



2011 National Mid-Year Conference Registration Form

Complete the Registration Form. Use photocopies of this form for additional registrations.

Full Name _____

First Name (As Preferred for Badge) _____

Title _____

Organization/Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Pre-Conference Program Sign-up

Check here if you are attending a pre-conference program on **Grant Implementation** (see descriptions under Conference Schedule) and add \$50 to your conference registration.

Check here if you are attending a pre-conference program on **Reducing Effects of Asthma** (see descriptions under Conference Schedule) and add \$50 to your conference registration.

Make Check or Purchase Order Payable to National Conference
Fed. ID No. 52-1225575 (Weil Communications and Marketing, Inc.)

I am making a registration payment in the amount of \$ _____

Payment is being made by (check one):

By Enclosed Check By Enclosed Purchase Order Send Invoice

____By Credit Card (complete information below)

___ Visa ___ Mastercard ___ American Express ___ Discover

Card Number _____

Expiration Date ____/____

Signature _____

Print Name on the Card_____

Credit Card Billing Address If Different from Above Address

Mail To: National Mid-Year Conference, PO Box 535, Olney, MD 20830, or fax to 301.924.0265

To contact the conference office, call 800.590.6522, or email to weilcm2@verizon.net.