

MISSOURI MILK, FOOD, AND
ENVIRONMENTAL HEALTH ASSOCIATION

2008 ANNUAL EDUCATIONAL CONFERENCE

APRIL 2 - 4, 2008

STONEY CREEK INN

2601 S Providence Rd, Columbia, MO 65101

573-442-6400

REGISTRATION FORM

Name (please print): _____

Title: _____

Div./Bureau/Section: _____

Mailing Address*: _____

Location Address: _____

City, State, Zip: _____

Phone: (_____) _____ - _____ ext: _____

Fax: (_____) _____ - _____

Email: _____

*Prefer business address for MMFEHA records.

PRE-REGISTRATION: Please check the appropriate box or boxes:

ONE-DAY ONLY (Wed, Thurs. or Fri.):	\$70.00	<input type="checkbox"/>	TOTAL DUE	\$ _____
ENTIRE CONFERENCE:	\$85.00	<input type="checkbox"/>	AMOUNT ENCLOSED	\$ _____
STUDENT (Edu Sessions only)	\$10.00	<input type="checkbox"/>	PO#	_____
GUEST BANQUET TICKET:	\$20.00	<input type="checkbox"/>	Check #	_____
DUES ONLY -not attending	\$15.00	<input type="checkbox"/>		

AT-DOOR REGISTRATION FEES:

ONE-DAY ONLY:	\$ 85.00	<input type="checkbox"/>
ENTIRE CONFERENCE:	\$100.00	<input type="checkbox"/>

Date Received _____

Membership # _____

Form # _____

REGISTRATION FEE (Except Student) INCLUDES: Membership Dues, Educational Sessions, Hospitality Hours, Banquet, and C.E.U. availability. ADVANCE REGISTRATION MUST BE RECEIVED BY MARCH 23, 2008. Registrations received after the deadline will pay "AT-DOOR" rates.

Submission of registration form alone, if received by March 23, 2008 will be considered as "Pre-Registered" so long as a purchase order/payment is received by the time of the conference. To avoid delays at the registration table, please remit your payment with the registration form at this time. Credit/debit cards can not be accepted.

Please mail completed form to:

MMFEHA
Gala Miller, Treasurer
PO Box 105017
Jefferson City, Mo. 65110
Phone: (573) 659-0706 or
(573) 893-3066