

MELNA EDUCATION WORKSHOP
FEBRUARY 29, 2024 KEELEY'S BANQUET CENTER
Registration Form for Workshop ** Submit by February 23, 2024**

Company Name _____

Name of Attendee _____

Additional Names _____

Mailing Address _____

City, State, Zip _____

Telephone: _____

Email: _____

Enclosed is \$65.00 per person for MELNA members and their employees, \$100.00 for non-members, \$35.00 for students. List all attendees' names.

Send to: MELNA, PO Box 4666, Augusta, ME 04330. Fax 623-6431; Call 207-623-6430 with questions, or email MngmtPlus@aol.com.

Total amount (enclose check or fill in credit card info below) \$_____.
Check Preferred

CC # _____ Expiration Date ____ / ____

Name as it appears on card: _____ 3-digit security code: _____

Signature _____

Billing address for credit card, if different from above:

Billing street address _____ (town and state not required)
Zip code _____

*Pre-registration fee is non-refundable. *There is no storm day, unless directed by Public Safety. Any cancellations will be broadcast on Channels 6 and 2. *Pick up badges at the door. *No confirmation will be sent.