PRE-REGISTRATION FORM NORTHEASTERN MOSQUITO CONTROL ASSOCIATION

mosquito control for health and comfort www.nmca.org

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Sea Crest Beach Hotel Falmouth, Massachusetts						
		DE	CEMBER 5 – 7	7, 2016		
NAME:						
ORGANIZA [*]	TION:					
			CITY/STATE:			
	E-MAIL:					
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		Des	Decistration For	Cabadida		–
Pre-Registration Fee Schedule						
Delegate ¹ \$225 Spouse/Companion/Children ² \$50						
Associate/Student ³ \$115						
	Ho	norary Mei	mbersNo Charge			
¹ includes ba	anquet, all coffee brea	ıks & socia	I functions, NMCA	A Proceedings, N	MCA Newslette	er & membership
	2in alveda a ha		fees	TE DECICEDAN	ITC ONLY	
³ include	es attendance at scier	ntific sessio	et only – DELEG<i>A</i> ons, coffee breaks s deduct \$30 (Ani	, NMCA Newslet	ter & membersl	hip fees only
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→ PR	RE-REGISTRA	NOITA	DEADLINE	IS NOVE	MBER 18	3, 2016 ←
*****	NOTE: Registrations		ter November 18, Spouse/Compan		5 for Delegates	s and
Name(s) (as	it should appear on b	nadge) – <i>in</i>	clude additional s	heets if necessar	ν	
(-) (-)		g-,	Delegate	Companion	Children	Associate
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	Sub Tota	ls:				
Total Remitt	ed: \$r					
	Please mail to	: John S	hepard PO Bo	x 6522 Hamd	len, CT 0651	7
SIGN	ME UP FOR THE N	MCA LISTS	SERVE-MAIL_			
				pleas	e write clearly	

PLEASE NOTE: ALL REGISTRATION INFORMATION IS KEPT CONFIDENTIAL AND WILL NOT BE DISSEMINATED TO ANY THIRD PARTIES PER VOTE OF THE NMCA EXECUTIVE BOARD.