

PRE-REGISTRATION FORM NORTHEASTERN MOSQUITO CONTROL ASSOCIATION

mosquito control for health and comfort
<www.nmca.org>

Hotel 1620
Plymouth, Massachusetts

DECEMBER 4 – 6, 2017

NAME: _____

ORGANIZATION: _____

MAILING ADDRESS: _____ CITY/STATE: _____

ZIP: _____ E-MAIL: _____ PHONE: _____

<u>Pre-Registration Fee Schedule</u>	
Delegate ¹	\$225
Spouse/Companion/Children ²	\$ 50
Associate/Student ³	\$115
Honorary Members.....	No Charge

¹includes banquet, all coffee breaks & social functions, NMCA Proceedings, NMCA Newsletter & membership fees

²includes banquet ticket only – **AVAILABLE TO DELEGATE REGISTRANTS ONLY**

³includes attendance at scientific sessions, coffee breaks, NMCA Newsletter & membership fees only

NOTE: Lifetime Members deduct \$30 (Annual Dues) from Delegate fee

➔ PRE-REGISTRATION DEADLINE IS NOVEMBER 17, 2017 ➔

NOTE: Registrations postmarked or received after November 17, 2017 will be \$235 for Delegates and \$60 for Spouse/Companion/Children

Name(s) (as it should appear on badge) – *include additional sheets if necessary*

	<u>Delegate</u>	<u>Companion</u>	<u>Children</u>	<u>Associate</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Sub Totals:	_____	_____	_____	_____

Total Remitted: \$_____ make check payable to: **Northeastern Mosquito Control Association**

Please mail to: John Shepard PO Box 6522 Hamden, CT 06517

CASH OR CHECKS ONLY

SIGN ME UP FOR THE NMCA LISTSERV....E-MAIL _____

please 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.