MINNESOTA PSYCHOLOGICAL ASSOCIATION 80TH ANNUAL CONVENTION

Friday & Saturday, April 15 & 16, 2015 | Crowne Plaza Minneapolis West, Plymouth, MN

REGISTRATION FORM

Please type or print clearly.								
Name:								
lighest Degree Earned: Licensure:								
Organization:								
Address:								
	State: Zip:							
Daytime Phone: Fax:								
E-mail: Special dietary restrictions:								
REGISTRATION:	On or Before March 17 - Full Convention	On or Before March 17 - One Day	March 17 - April 8 - Full Convention	March 17 - April 8 - One Day Only	Onsite - Full Convention	Onsite - One Day Only	Total	
MEMBER	□ \$310	□ \$210	□ \$340	□ \$240	□ \$380	□ \$280	\$	
NON-MEMBER	□ \$410	□ \$310	□ \$440	□ \$340	□ \$480	□ \$380	\$	
STUDENT MEMBER*	□ \$100	□ \$60	□ \$140	□ \$100	□ \$180	□ \$140	\$	
STUDENT NON-MEMBER	□ \$125	□ \$85	□ \$165	□ \$125	□ \$205	□ \$165	\$	
The registration fee includes breakfast, lun	ch. refreshment b	reaks. conferenc	ce materials. CE c	ertificates and a	ccess to Friday e	venina's reception	on & entertainment.	
*To receive the student rate, you must be a full-time student. MPA reserves the right to request copies of student fee statements to verify status.								
If you're registering for one day only, please select which day you plan to attend. Friday Saturday								
MEMBERSHIP: ONE STOP SHOPPING!								
□ Join MPA for just \$95!								
This is a great time to become a member of MPA because, with your paid entrance fee into the 2016 Annual Convention, you can become a full member for one year for just \$95!								
You will receive full membership status, a \$295.00 value, for just \$95.00 for the first year. Simply check the box above and include the \$95 in your payment! Hurry because this deal is only available for an exclusive time!								
☐ Will you be attending the Friday Night Social? How many guests will be attending the Social with you?								
STUDENT SCHOLARSHIPS	5:							
☐ I would like to contribute to the MPA Annual Convention Student Scholarship Fund which will help support student attendance at the Annual Convention. \$								
☐ I am a MPA member and a full-time	student. I am req	uesting financi	ial assistance wi	th my registrati	on. Please conta	ct me regardin	g this opportunity.	
PAYMENT:								
□ Check (#)	■ MasterCard	1	⊐ Visa	☐ Americ	an Express			
All fields below are required if paying by cred	lit card							
Total Amount Due: \$	Credit card #:					Exp.	date:	
Signature:	Print name:							
If you have any questions, please contact us at (952) 564-3048. Fax or mail completed application form along with payment to:								

MPA Annual Convention

5353 Wayzata Blvd, Suite 350 Minneapolis, MN 55416

Phone: (952) 564-3048 Fax: (952) 252-8096

