

WSPSA 2015 Annual Conference & Educational Seminar Registration Form

September 11TH AND 12TH 2015

Icicle Village, 505 Hwy 2 Leavenworth WA 98826 509-888-2272

Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone Number: () _____ Fax Number: () _____ E-mail: _____

ATTENDEES NAMES (Print the way you would like your name badge to read)	REGISTRATION (\$50.00) <u>Late registration – add \$25*</u>		
		<u>Individual Event Pricing</u>	
1.	\$		
2.	\$		Saturday Lunch \$20.00
3.	\$		
4.	\$		

*LATE FEES WILL BE APPLIED TO REGISTRATION FORMS RECEIVED AFTER 9/11/15. THIS INCLUDES ON-SITE REGISTRATION AND INDIVIDUAL EVENTS.

ALL CANCELLATIONS RECEIVED AFTER SEPTEMBER 5TH^H, 2015 ARE NON-REFUNDABLE

Please indicate any dietary restrictions: _____

SPONSORSHIP

Sponsors will have their name and company name listed on a sign at the registration area and will also be listed in the Conference Booklet and in The Newswire.

Please note there will not be designated sponsorship levels.

Member Name	Company Name	Total Donation
		\$

PAYMENT OF FEES:

Check (made payable to **WSPSA**) Visa Amex MC Total: \$ _____ Card Holder Name: _____

Card Number: _____ Exp. Date: _____ 3-4 Digit PIN _____ Signature: _____

**Please mail completed registration form to: WSPSA 2015 Conference | 13300 Bothell Everett Hwy, PMB 674 Mill Creek, WA 98012
Phone: (206) 356-0875 | OR scan & email to exdirector@wpsa.com**

WANT AN EXHIBITOR REGISTRATION PACKET? -- CHECK HERE []