



NALS OF MICHIGAN 58th Annual Meeting and Educational Conference
April 25-28, 2019— Delta Marriott, Kalamazoo Michigan

REGISTRATION INFORMATION

Name _____ Local Chapter _____ Certification(s): _____ Badge Name/Nickname _____ Address _____ City _____ State/ZIP _____ Work _____ Home _____ Email _____ *Guest(s) _____ Please describe any accommodation (mobility, dietary restrictions, etc.) you will need: _____	<p style="text-align: center;">(Please check all that apply.)</p> <input type="checkbox"/> Member <input type="checkbox"/> Student Member <input type="checkbox"/> Past State President <input type="checkbox"/> State Officer <input type="checkbox"/> First Time Attendee <input type="checkbox"/> I will be attending the First Timer's Reception on Friday morning. (Those attending the Conference for the first time are strongly encouraged to attend.) CHECK PAYABLE TO: NALS of Michigan 2019 Annual Meeting Fund Amount of check enclosed \$ _____ MAIL REGISTRATION FORM TO: Nancy Thomas, PLS c/o Miller Canfield 277 S. Rose Street, Suite 5000 Kalamazoo, Michigan 49007 Email: Thomasn@millercanfield.com
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SCHEDULE OF EVENTS (Check all events that you plan to attend.)

Please check only one: <input type="checkbox"/> Full Registrant <input type="checkbox"/> Partial Registrant (go to next column) Full Registration Fee Schedule (includes all events): <input type="checkbox"/> Postmarked on OR BEFORE March 24, 2019 <input type="checkbox"/> Member \$145 <input type="checkbox"/> Future Member \$195 <input type="checkbox"/> Postmarked AFTER March 24, 2019 <input type="checkbox"/> Member \$160 <input type="checkbox"/> Future Member \$220 GUEST <input type="checkbox"/> Friday Exhibitor/Candidate Lunch (\$28) <input type="checkbox"/> Saturday Certification Lunch (\$28) <input type="checkbox"/> Saturday Banquet (\$48) NOTE: If more than one guest will be accompanying you, please attach a separate sheet with information. If your guest is attending meal functions, please refer to the partial registration fee schedule.	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4" style="text-align: center;">Partial Registration Fee Schedule--Please Check all that Apply Add \$20 if postmarked AFTER March 24, 2019.</th> </tr> <tr> <th colspan="2" style="text-align: center;">Member</th> <th colspan="2" style="text-align: center;">Future Member</th> </tr> </thead> <tbody> <tr> <td style="width:5%; text-align: center;"><input type="checkbox"/></td> <td style="width:45%;">Friday <u>Only</u> (includes all meals and breaks) (\$75)</td> <td style="width:5%; text-align: center;"><input type="checkbox"/></td> <td style="width:45%;">Friday <u>Only</u> (includes all meals and breaks) (\$100)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Saturday <u>Only</u> (includes all meals and breaks) (\$100)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Saturday <u>Only</u> (includes all meals and breaks) (\$150)</td> </tr> </tbody> </table>	Partial Registration Fee Schedule--Please Check all that Apply Add \$20 if postmarked AFTER March 24, 2019.				Member		Future Member		<input type="checkbox"/>	Friday <u>Only</u> (includes all meals and breaks) (\$75)	<input type="checkbox"/>	Friday <u>Only</u> (includes all meals and breaks) (\$100)	<input type="checkbox"/>	Saturday <u>Only</u> (includes all meals and breaks) (\$100)	<input type="checkbox"/>	Saturday <u>Only</u> (includes all meals and breaks) (\$150)
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HOTEL INFORMATION

Reservations can be made directly through the hotel by clicking [here](#).
Delta Hotels Kalamazoo Conference Center
 2747 South 11th Street Kalamazoo, Michigan 49009 (269) 375-6000
 Guest Room \$110 per night.
QUOTED ROOM RATES ARE AVAILABLE UNTIL MARCH 25, 2019.
REFUND POLICY: Fifty percent (50%) registration refund if received before April 1, 2019. **No refund after April 1, 2019.** No exceptions.
NO SMOKING POLICY: In consideration of attendees, please find designated outdoor smoking areas.