

MMTA 2018 CONFERENCE REGISTRATION FORM
64th MMTA CONFERENCE, Nov. 2-3, 2018
William Carey University--Hattiesburg, MS

Please mail your Conference registration form and Banquet and IMTF Luncheon fees
to arrive by Tuesday, October 23 to:

Victoria Johnson
 707 S. 18th Ave.
 Hattiesburg, Mississippi 39401

The Conference advance registration fee includes the Conference Program Book as well as admission to all workshops, lectures, and concerts during the 2018 Conference. Your materials and name tag will be available at the Conference registration desk. Registration fee for the conference is \$30 for members and \$60 for non-members. College and pre-college students may attend at no cost.

Please note that the Guest Artist Recital featuring Dr. Chuck Chandler, Tenor, on Friday evening at 7:30 PM is open to the public with no admission charge.

Our annual conference presents opportunities for professional development, networking, and assistance in MTNA certification. We will offer a certificate of attendance for any student or teacher.

Registration fees will also be accepted at the Conference registration desk.

I am enclosing payment for the following (please indicate your preference):

- _____ **\$30 - MMTA MEMBER REGISTRATION FEE**
 _____ **\$60 - Non-Member REGISTRATION FEE**
 _____ **Free - College or Pre-college student REGISTRATION**

_____ **BANQUET FEE (buffet): \$15.99** Roasted Pork Loin, Chicken Piccata, Parsley Butter Baby Potatoes, Spring Vegetable Medley, Squash Casserole, Dinner Rolls, Crackers, Garden Green Salad, Cheesecake with Strawberry Topping, Peach Cobbler, Iced Tea, Coffee, and Water. **There will also be a vegan/gluten-free entrée available. Please check here if you desire the vegan/gluten-free option:** _____

_____ **IMTF (Independent Music Teachers Forum) LUNCHEON FEE: \$10.00** (Please choose from the following Deluxe Crusader Lunch Box options):

1. Turkey/Swiss on Wheatberry Bread
 2. Ham/American on Wheatberry Bread
 3. Chicken Salad on Wheatberry Bread
 4. Hummus/Fresh Vegetable Wrap (vegan and gluten-free)

\$_____ TOTAL ENCLOSED (make checks payable to MMTA)

Information for Conference name tag: NAME: _____

MMTA Local Affiliate/Office/School/Other: _____

I would like a Certificate of Conference Attendance. ___ YES ___ NO

Please check this box if you would like MTNA/MMTA membership Information

Sponsorship:

If you wish to sponsor someone who has never been to an MMTA conference, please indicate their name, cell phone, and email address below. Their conference registration fee will be waived. PLEASE NOTE: This sponsorship covers their registration fee only. Banquet and IMTF luncheon fees are the responsibility of the person being sponsored.

Name of person being sponsored: _____ Cell Phone: () _____

Email of person being sponsored: _____

