



Online registration is strongly encouraged.
Please [CLICK HERE TO REGISTER ONLINE TODAY!](#)

2014 CONFERENCE REGISTRATION FORM

Please submit one form per registrant..

REGISTRATION FEE: *Registration deadline is Friday, December 20, 2013. A \$10 late registration fee will be assessed after this date. Conference registration fee includes general sessions, breakout sessions, breakfast, lunch, refreshment breaks, and continuing education credits.*

- | | | | |
|--------------------------|----------------------------|--------------------------|--------------------------------|
| <input type="checkbox"/> | Professional - \$85 | <input type="checkbox"/> | Non-Profit/State Agency - \$75 |
| <input type="checkbox"/> | MACMHC Member/Staff - \$65 | <input type="checkbox"/> | Student - \$35 |

PLEASE TYPE OR PRINT

Name: _____
Agency/Organization: _____
Title: _____
Address: _____
Phone: _____ Email: _____

ADA/Section 504: If you have special needs please contact FTC Prevention Services, LLC at 601-939-0020 or ftcprevention@bellsouth.net by **December 13, 2013**.

Please check one

- I will need Continuing Education Credit I will need an Attendance Certificate

Cancellation Policy: Advertisement commitments are non-refundable; however, may be transferred if notification is received **by January 3, 2014**.

Accommodations:

Call the extraordinary Hilton Jackson at 601-957-2800 or reserve hotel accommodations online at <http://www.hiltonjackson.com/accommodations.php>. Mention Mississippi Association of Community Mental Health Centers Conference to secure a special conference rate of **\$114 prior to December 13, 2013**. Rooms with conference rates are limited.

Payment: Please send your registration fee via US Mail. Make check payable to:
Mississippi Association of Community Mental Health Centers.

MAIL FORM AND FEE TO:

Region 8 Mental Health
Attn: Emile Craig, Director of Administration
PO Box 88
Brandon, MS 39043

TOTAL AMOUNT ENCLOSED: \$ _____