

Learn **Winter CE 2019** Spa  
 Ski **Big Sky, MT**  
 Educate **January 11th, 12th, 13th** Revitalize  
 Network

### Registration Form

Name – as it should appear on your name badge \_\_\_\_\_ Employer \_\_\_\_\_

Mailing Address \_\_\_\_\_ City / State / Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Please let us know if you have dietary allergies or restrictions \_\_\_\_\_

**Registration fee includes** continuing education credits and meals and breaks that are including in the conference agenda for the days of registration. Handouts are not provided but will be posted on the website in advance of the meeting. **Please provide your email** so that you receive the email message with a link to the presentations.

| Category             | Member To 12/20 | Member After 12/20 | Non-member To 12/20 | Non-member After 12/20 | Member Saturday only | Non-member Saturday only |
|----------------------|-----------------|--------------------|---------------------|------------------------|----------------------|--------------------------|
| Pharmacist           | \$290           | \$320              | \$465               | \$480                  | \$230                | \$400                    |
| Pharmacist- Resident | \$100           | \$125              | \$100               | \$125                  | \$60                 | \$60                     |
| Pharmacy Technician  | \$145           | \$170              | \$195               | \$205                  | \$95                 | \$135                    |
| Student              | \$50            | \$50               | \$50                | \$50                   | \$50                 | \$50                     |
| Nurse Practitioner   | \$290           | \$320              | \$465               | \$480                  | \$230                | \$400                    |

**Optional:** I would like to make a donation to student registration costs for this meeting in the amount of \$ \_\_\_\_\_

Will a guest be attending meals with you?  Yes  No

If yes, please provide name for badge \_\_\_\_\_

- Meal tickets for your guests are:
- Friday Dinner -- \$60
  - Saturday Breakfast -- \$25
  - Saturday Lunch -- \$25
  - Saturday Sports Event -- \$20
  - Sunday Breakfast -- \$15

**total fees (registration, guest meals, optional donations) are** \$ \_\_\_\_\_

**Make check payable to MPA** and mail to PO Box 1569, Helena, MT 59624  
 For Conference updates. Go to [www.rxmt.org](http://www.rxmt.org) ⇒ Education/Events ⇒ Winter CE Conference.

**Cancellations / Refund Policy** Full refunds will be available for cancellation of registrations made by December 16. MPA will retain a \$25 administrative fee for cancellations between December 17 and January 3. Cancellations after January 3 and no-shows are not eligible for refund. Substitute registrations are available at all times.

**Questions?** Contact Suzanne at 406-449-3843 or [smorgan@montana.com](mailto:smorgan@montana.com)