

MRA Seminar 32 Registration Form

January 20-23, 2010 Caesars Palace Las Vegas, NV
Registration Deadline is December 18

COMPANY _____
ADDRESS _____
CITY _____ ST/PROVINCE _____ ZIP _____
PHONE _____ FAX _____
PLEASE INDICATE: Member Nonmember PLEASE INDICATE: Rep Manufacturer Vendor

REGISTRANTS

Print as You Wish Badges to Read Attach Extra Sheet if Needed
Registration Fee Must Be Paid for All Listed No Partial Tickets

1) NAME _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
SPOUSE/GUEST _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
CHILDREN _____ (Age _____) _____ (Age _____) _____ (Age _____)

2) NAME _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
SPOUSE/GUEST _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
CHILDREN _____ (Age _____) _____ (Age _____) _____ (Age _____)

3) NAME _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
SPOUSE/GUEST _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
CHILDREN _____ (Age _____) _____ (Age _____) _____ (Age _____)

4) NAME _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
SPOUSE/GUEST _____ CITY/ST _____
First MRA meeting? *CPMR?* *Check if staying for Saturday breakfast:* E-MAIL _____
CHILDREN _____ (Age _____) _____ (Age _____) _____ (Age _____)

Second Page of Form Must Be Completed and Returned

Seminar 32 Optional Activities

Thursday, January 21, Poker Tournament

Texas Hold 'Em. Cash Bar. Registration Fee: \$30 Initial Buy-In: \$25

NAME _____

NAME _____

NAME _____

NAME _____

Thursday, January 21 Night on the Town

No plans for that night? Let us know! We'll put something together and get back to you for final sign-up. Be sure to include your spouse's name, if applicable.

NAME _____

Email _____

NAME _____

Email _____

NAME _____

Email _____

Friday, January 22 Night on the Town

No plans for that night? Let us know! We'll put something together and get back to you for final sign-up. Be sure to include your spouse's name, if applicable.

NAME _____

Email _____

NAME _____

Email _____

NAME _____

Email _____

Raffle Tickets, \$10 each

Cash prize! Drawing at last session on Friday afternoon. Must be present to win.

NAME _____ # _____

NAME _____ # _____

NAME _____ # _____

NAME _____ # _____

Computation of Registration Fees

Total Fees Must Accompany This Form. No Partial Tickets. Indicate Number of Registrants, Multiply Across, Then Add Down.

REPS, MANUFACTURERS & VENDORS:

First from firm	_____ x \$679 =	\$ _____
Second from firm	_____ x \$499 =	\$ _____
Third through fifth from firm	_____ x \$399 =	\$ _____
Sixth and all others	_____ x \$299 =	\$ _____
Nonmember	_____ x \$870 =	\$ _____

SPOUSES: _____ x \$215 = \$ _____

CHILDREN (12 and under): _____ x \$ 50 = \$ _____

OPTIONAL ACTIVITIES:

Thursday Poker Tournament _____ x \$ 55 (includes initial buy-in of \$25) = \$ _____

POKER TOURNAMENT SPONSORSHIP (THANK YOU!): _____ x \$150 = \$ _____

RAFFLE TICKETS: _____ x \$ 10 = \$ _____

TOTAL OF ALL FEES: (3% will be added to fees charged to AmEx) \$ _____

TOTAL ALL ACROSS

Complete Then Mail to MRA at P.O. Box 150229, Arlington, TX 76015 or Fax to 682.518.6476

PLEASE INDICATE: Check enclosed payable to MRA **OR** Charge fees to AmEx: 3% will be added to total fees if payment is made by AmEx (*no other cards accepted*)

Card Number _____ Exp. _____