

REGISTRATION FORM

Name: _____

Agency: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: (____) _____ Work Phone: (____) _____

Email: _____

Please select a category:

Early Bird 1/3/25

Regular 1/31/25

Professional Rates:

NASW Member [# _____]
(Membership must be active at time of registration and will be verified.) _____ \$325 _____ \$ 375

Non-Member _____ \$375 _____ \$ 425

Presenter Rates: (Presenter registration due by January 31, 2025)

Presenter-Workshop NASW Member [# _____]
(Membership must be active at time of registration and will be verified.) _____ \$ 160

Presenter-Workshop Non-member _____ \$ 225

Student Rates:

Student NASW Member [# _____] MSW & BSW
(Membership must be active at time of registration and will be verified.) _____ \$ 0

Student Non-member _____ \$ 65

Check Payments: All checks must be received by **March 3, 2025**. Make checks payable to **NASW- MS**. Please mail checks and completed registration form to **P.O. 5599, Pearl, MS 39288**. Returned checks will cost \$35 plus any additional bank processing charges.

Online Payments: Online registration will remain open until **March 7, 2025**. **ALL CONFIRMATIONS & RECEIPTS WILL BE EMAILED AT THE TIME OF REGISTRATION**. Please keep a copy for personal records. No onsite registration or checks will be received on the day of the conference.

Refund Policy: All registrations are final. **NO REGISTRATION REFUNDS**. All funds may be credited toward future events. Must submit email proof at time of registration.

Permissions: Please initial here _____ giving NASW-MS permission to email and/or text you about upcoming NASW-MS advocacy, community, and educational events.

Signature: _____

Date: _____

*March 27-28, 2025, Westin Hotel, Jackson, MS