

Minnesota Society of Radiologic Technologists

Educational Conference

September 28, 2018 Best Western Kelly Inn 100 4th Ave.S. St. Cloud, MN

REGISTRATION FORM

Please read carefully and PRINT all requested information!

NAME: _____
(Print your name exactly as you would like it to appear on your nametag, **including all credentials!**)

MSRT/REGION/MARS/MSRT COMMITTEE OFFICER: _____
(Please indicate position currently held)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PRIMARY PLACE OF EMPLOYMENT: _____

E-mail Address: _____
(E-mail address will only be used to notify you of MSRT business/happenings)

ARE YOU A MSRT MEMBER: Yes No

ARE YOU A: MSRT LIFE MEMBER Yes No MSRT HONORARY MEMBER Yes No

**SECTION A: CONFERENCE REGISTRATION:
YOUR REGISTRATION INCLUDES ALL FOOD OFFERINGS.**

You may **ONLY** choose **ONE** category!

ALL Affiliate Society Members may register at the MSRT Member price.

Proof of current non-Minnesota affiliate membership MUST be included with registration.

MSRT MEMBER

NON-MSRT MEMBER

Friday Only \$80.00

Friday Only \$100.00

ALL STUDENTS

Friday Only \$50.00

FOR REGISTRATIONS POSTMARKED AFTER September 20, 2018, ADD AN ADDITIONAL \$20.00, REGARDLESS OF REGISTRATION TYPE! **NO SAME DAY REGISTRATIONS WILL BE ALLOWED!**

****REGISTRATIONS RECEIVED AFTER September 21, 2018, MAY BE RETURNED!****

Please indicate any special dietary needs: _____

Make checks payable to: MSRT EDUCATIONAL CONFERENCE 2018

Return Registration Form and your Educational Session Selection Forms to:

Deanna Butcher 9347 County Road 146 Kimball, MN 55353

Additional forms available at www.mnsrt.com On-line registration is also available at www.mnsrt.com.