



KASFAA Spring 2010 – April 7 -9, 2010
 CONFERENCE REGISTRATION FORM
 Grand Prairie Hotel & Convention Center
 1400 N Lorraine St - Hutchinson, KS 66607
 620-669-9311 Group Block Reference - KASFAA

Registration must be completed for EACH person attending the conference. The registration fee includes admission to all sessions and meals and is required of *everyone* attending one or more sessions. This form may be photocopied.

Please type or print legibly. This information will be used for conference registration and future mailings to members.

NAME: _____ NAME FOR TAG: _____
 SCHOOL/ORGANIZATION: _____ TITLE: _____
 E-MAIL ADDRESS: _____ TELEPHONE: _____
 MAILING ADDRESS: _____

IS THIS YOUR FIRST KASFAA CONFERENCE? YES NO
 WOULD YOU LIKE A KASFAA MEMBER AS A MENTOR? YES NO

SPECIAL NEEDS: DIETARY NEEDS _____ OTHER (PLEASE SPECIFY) _____

Registration form received by 5:00 p.m. March 19, 2010 (members only) \$125.00 \$ _____
 Registration form received between March 20 & April 6, 2010 (members only) \$135.00 \$ _____
 On-Site registration April 7 -9, 2010 and non-member registration (includes \$15.00 late fee) \$140.00 \$ _____

Reservations for Meals YOU will be attending:

Wednesday Dinner _____ Thursday Breakfast* _____ Thursday Lunch _____ Thursday Banquet _____ Friday Breakfast* _____
 *Only if not staying at Ramada *Only if not staying at Ramada

You may purchase additional guest meal tickets as listed below.

Additional Guest Meal Tickets (Note: Registration includes your meals. This is for additional meals for your guests):

Wednesday Dinner # _____ @ \$17.95 each = \$ _____
 Thursday Lunch # _____ @ \$10.95 each = \$ _____
 Thursday Banquet # _____ @ \$22.50 each = \$ _____

TOTAL AMOUNT FOR THIS REGISTRANT \$ _____

Make your CHECK payable to KASFAA and send it to:

Donna Carter, KASFAA Treasurer
 Financial Aid Office, Wichita State University
 1845 Fairmount St., Wichita KS 67260-0024

Please submit a printed copy of your Registration Form to:

Donna Carter, KASFAA Registration Committee
 Wichita State University
 1845 Fairmount St. Box 24, Wichita, KS 67260-0024

For further information about registration contact Donna at (316) 978-5022, 800-522-2978 or donna.carter@wichita.edu
 Requests for refunds must be submitted in writing or by email to Donna Carter

Conference Planning Use Only: Date received _____ Amount Received \$ _____ Cash (x) _____
 Bank _____ Agency check # _____ Personal Check # _____ Receipt # _____