

REGISTRATION INFORMATION

Live Conference ♦ Lansing Center ♦ April 12-13, 2022

333 East Michigan Avenue, Lansing Michigan 48933

COSTS

	Cost if postmarked ON OR BEFORE 3/25/22		Cost if postmarked AFTER 3/25/22 & ON SITE REGISTRATION	
	ONE DAY	TWO DAYS	ONE DAY	TWO DAYS
<i>per person</i>	\$165	\$190	\$180	\$205

GUIDELINES

- Register in advance with payment **POSTMARKED by MARCH 25, 2022** and your badge, etc. will be mailed to you. No waiting in line when you arrive!
* AFTER March 25th, YOU MUST REGISTER ON SITE, at the Lansing Center.
- You may register at the door (expect lines). To register at the door, complete the included registration form and present it with payment at any ON SITE REGISTRATION line.
- All changes in registration must be received **IN WRITING** at the address below prior to March 25, 2022. Changes after March 25th must be performed **ON SITE**.

CANCELLATION POLICY:

Cancellation requests must be sent in writing to PO Box 1098, Okemos, MI 48805. All cancellations received prior to the deadline will be charged a fee of 10% of the total purchase price. No refunds will be issued on cancellations received after March 25, 2022. Telephone cancellations will not be accepted.

ON-SITE REGISTRATION HOURS

Monday, April 11, 2022	1:00 PM – 3:00 PM
Tuesday, April 12, 2022	7:00 AM – 2:00 PM
Wed., April 13, 2022	7:00 AM – 1:30 PM

LUNCHEONS

All registrations include lunch, which will be served in the exhibition hall of the Lansing Center 11:00 AM – 1:30 PM daily.

SPECIAL NEEDS

The Lansing Center is handicap accessible. Please call 517.203.0737 if you need accommodations.

EVENT MOBILE APP

Search your mobile device App Store (after March 15th) for "Michigan Safety Conference" to download the MSC event app.

After downloading the app, create a personal profile to access conference information, connect with vendors, set your own personal schedule and track your CEUs.

AVAILABLE FOR DOWNLOAD MARCH 2022



REGISTRATION FORM

REGISTER ONLINE: MICHSAFETYCONFERENCE.ORG

Have you attended a previous conference? Yes No How did you hear about the 2022 conference? _____

Step 1 – Company Information

Each participant must register with a unique email address in order to access the conference mobile app, which is how CEU participation will be tracked.

Company Name _____ Contact Person _____

Shipping Address (No P.O. Boxes please.) (Mail Stop/Mail Code) _____ Telephone (include extension) _____ Fax _____

City _____ State _____ Zip Code _____ Michigan County _____

Mobile number (enter if you wish to receive text messages about the event from our mobile app) _____

Step 2 – Person Attending the Conference

Please TYPE or PRINT CLEARLY

AUTHORIZED BUYER? Yes No
Certifications? _____

First Name (as you wish it to appear on your badge)

Last Name

Title _____ Email address _____

Online registration available at:
www.michsafetyconference.org

DAY(S) ATTENDING

- Tuesday
- Wednesday
- Both days
- President's Dinner (Tuesday)
- CPR Training* (Wednesday)

* You must also register Wednesday or Both Days

AMOUNT DUE

\$ _____ (\$165 early, \$180 late)

\$ _____ (\$165 early, \$180 late)

\$ _____ (\$190 early, \$205 late)

\$ _____ (\$50 additional fee)

\$ _____ (\$40 additional fee)

TOTAL THIS PAGE

\$

Please make checks payable to Michigan Safety Conference.

Michigan Tax I.D. 38-6094509

There are no refunds on or after March 25, 2022.
For cancellations prior to March 25, 2022, there will be a cancellation fee of 10% of the total purchase price.

Step 3 – Payment (MUST accompany registration or your form will be returned)

- Visa Amex Mastercard Discover Check

3-Digit Security Code (see back of card) _____

Card Number _____ - _____ - _____ - _____

4-Digit Security Code (AMEX only) _____

Exp. Date ____ / ____ Cardholder _____

Email receipt to: _____

Signature _____

I authorize Michigan Safety Conference to process payment in the amount indicated.

MAIL with payment to: Michigan Safety Conference, PO Box 1098, Okemos, MI 48805. QUESTIONS? 517.203.0737

For office use only:

Date Paid: _____ Payment Reference: _____ Registrant Number: _____ Amount Owed: _____