

# 2018 MHISC SPRING MEETING

## REGISTRATION FORM

**APRIL 26-27, 2018 \* THE MARRIOTT \* DOWNTOWN COLUMBIA**

To receive group room rate, call (803) 771-7000.

(Room Rate expires MARCH 30, 2018.)

Company Name: \_\_\_\_\_

Your Name: \_\_\_\_\_ Badge should read: \_\_\_\_\_

Other Attendees: \_\_\_\_\_ Badge should read: \_\_\_\_\_

\_\_\_\_\_ Badge should read: \_\_\_\_\_

\_\_\_\_\_ Badge should read: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### PAYMENT INFORMATION

**\*Member / Spouse:** Number of Attendees \_\_\_\_\_ x \$70 per person = \$\_\_\_\_\_

\*Spouses receive the discounted member rate

**Non-Member Rate:** Number of Attendees \_\_\_\_\_ x \$85 per person = \$\_\_\_\_\_

\_\_\_\_\_ I have enclosed a check.

\_\_\_\_\_ Please bill my Visa or MasterCard (circle one)

Name on Card: \_\_\_\_\_ Acct Number: \_\_\_\_\_

Exp Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

**Send registration & payment to: MHISC, 1801 Gadsden Street, Columbia, SC 29201**

**Fax to: (803) 771.7023 Or Email: [awestmoreland@mhisc.com](mailto:awestmoreland@mhisc.com)**

*Questions? Call MHISC at (803) 771-9046.Ext. 5 or Email: [awestmoreland@mhisc.com](mailto:awestmoreland@mhisc.com)*