



MGMA Missouri REGISTRATION FORM

Mapping Your Way Through Healthcare... A TREASURE AWAITS YOU!

May 2-4, 2010 ♦ Tan-Tar-A Resort, Osage Beach

Name (Please print as it should appear on name badge) _____ Suffix _____

Practice/Company Name _____ Title _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address _____ Phone Number _____

Are you a MGMA-MO Member? Yes No ACMPE Overview (Sunday May 2, 2010) Yes No
 Are you a first time attendee? Yes No Treasuring Your New Management Responsibilities (Sunday May 2, 2010) Yes No
 If yes, would you like a mentor? Yes No

CONFERENCE FEES: (Registration fee includes Meals, Entertainment, General & Breakout Sessions)

	Before 04/02/10	After 04/02/10
MGMA-MO MEMBER	\$295	\$395
AAPC MEMBER	\$295	\$395
NON MEMBER	\$395	\$495
MGMA-MO LIFE MEMBER	\$125	\$150
GUEST	\$125	\$125

(An individual accompanying an MGMA-MO conference attendee and participating in Sunday & Monday evening activities and the guest breakfast on Monday & Tuesday. This category does not include breakout sessions.)

SUNDAY SPECIAL SESSION (Space is limited to 50 attendees):

INTRO TO FINANCIAL MANAGEMENT FOR THE MEDICAL PRACTICE \$ 25 \$ 25
 Presented by Christine Keefe, CPA, Karen S. Schechter, CCS-P and Jerrie K. Weith, FHFMA

ANNUAL BOWLING FUNDRAISER (Sunday May 2, 2010) \$ 10 \$ 10

The Scholarship Committee in conjunction with our sponsor Gateway EDI will be hosting the annual Bowling Fundraiser. This is open to all MGMA-MO conference attendees, their families and exhibitors. Join us for some laughs, prize giveaways, and support the scholarship fund.

Participant's Name: _____ Additional Player(s): _____

CONFERENCE PAYMENT

Conference Registration \$ _____
 Guest Registration @ \$125 \$ _____
 Special Session @ \$25 \$ _____
 Bowling Fundraiser @ \$10/person \$ _____
TOTAL AMOUNT ENCLOSED \$ _____

NOTE: If you have a disability and/or require special accommodations please call (573) 556-6111.

CANCELLATION POLICY: Cancellations received prior to April 12, 2010 are subject to a \$50.00 fee. Cancellations before April 30, 2010 are subject to a \$100.00 fee. Cancellations after April 30, 2010 and no-shows cannot be refunded. Substitutions from within the same group are acceptable.

Please select payment option below:

1. Fax along with credit card payment to: **(877) 365-6462**

VISA MasterCard American Express

Account # _____

Exp. Date _____ Vcode _____ Billing Zip Code _____

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Signature _____

2. Mail along with payment to:

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