

# REGISTRATION FORM

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Institution: \_\_\_\_\_

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

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

Phone: (\_\_\_\_) \_\_\_\_\_

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

**EARLY BIRD RATE  
POSTMARKED BY  
OCTOBER 15!**

**First Time Attendee**

- Yes
- No

**KMA Membership Year:  
October 1 - September 30**

**New Member or Renewals (check one)**

- Join
- Renew

**KMA Institutional Membership**

- Level 1 (budget less than \$50,000) : \$35
- Level 2 (budget \$50,000-\$250,000) : \$60
- Level 3 (budget more than \$250,000) : \$85
- Corporate (for profit institution) : \$100

**KMA Individual Membership**

- Regular: \$20
- Contributing: \$30
- Supporting: \$50
- Sustaining: \$100
- Benefactor: \$500
- Student: \$13

**Business Membership**

- Corporate Member: \$100
- Corporate Patron: \$200

## CONFERENCE RATES

**Full Conference Registration**

	Early Bird Rate Postmarked by October 15	Pre-Registration Rate Postmarked by October 30	Onsite Rate November 4-6
<input type="radio"/> Member Rate	\$135	\$150	\$160
<input type="radio"/> Non-Member Rate*	\$145	\$160	\$170
<input type="radio"/> Student Member Rate	\$90	\$100	\$100
<input type="radio"/> Non-Member Student Rate*	\$103	\$116	\$116

**One Day Registration**

For one-day rate, please check the date you wish to attend:

Thursday, November 5 OR  Friday, November 6

<input type="radio"/> Member Rate	\$80	\$85	\$100
<input type="radio"/> Non-Member Rate*	\$90	\$100	\$105
<input type="radio"/> Student Member Rate	\$50	\$58	\$63
<input type="radio"/> Non-Member Student Rate*	\$58	\$63	\$68

*\*Non-member rate includes an individual membership at a discounted rate for the first year.*

**Session Preferences**

Please help us determine space requirements by marking the sessions you plan to attend. This does not bind you to attend these specific sessions; you are welcome to change your mind.

**Thursday, 11/5**

Morning	1A	2A	3A	4A
Early Afternoon	1B	2B		
Afternoon	1C	2C	3C	4C
Mid-Afternoon	1D	2D	3D	
Late Afternoon/Eve	1E	2E		

**Friday, 11/6**

Early Morning	1F	2F	3F	4F
Mid Morning	1G	2G	3G	4G

**Grants & Scholarships  
Donation (Optional)**

Each year KMA offers grants and scholarships. If you would like to help us, indicate the amount you would like to donate.

- \$10
- \$25
- \$50
- Other Amount \$ \_\_\_\_\_

# EVENT FORM

Please indicate the appropriate boxes to attend all events even if there is no additional fee for the event. Included means that it is included in the conference registration, which means there is no cost for the event when registered for the conference. Space is limited for some events. Registration will be handled on a first come first served basis.

## Wednesday, November 4

W1: Volunteer & Docent Programs (NO LUNCH)	_____	x\$20	_____
W2: Research Writing / Grants (LUNCH PROVIDED)	_____	x\$35	_____
W3: Museum Stores (LUNCH PROVIDED)	_____	x\$35	_____
T1: Bison Ranch, Haven, KS	_____	x\$10	_____
T2: Kansas State Fair Historic Tour	_____	x\$10	_____
MINT Event	_____	x Included	_____
Please Choose: ___Mentor ___Mentee			
Opening Reception	_____	x Included	_____

## Thursday, November 5

Annual Business Meeting	_____	X Included	_____
Breakfast	_____	X Included	_____
	Add Guest(s)	_____	x\$12 _____
Luncheon	_____	X Included	_____
	Add Guest(s)	_____	x\$15 _____
Dinner & Benefit Auction	_____	X Included	_____
	Add Guest(s)	_____	x\$25 _____

## Friday, November 6

Breakfast	_____	X Included	_____
	Add Guest(s)	_____	x\$12 _____
Awards Luncheon	_____	X Included	_____
	Add Guest(s)	_____	x\$15 _____

**Subtotal Events:** \_\_\_\_\_

**Please indicate all types of your institution (check all that apply):**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Art Gallery/Museum | <input type="checkbox"/> Archives           | <input type="checkbox"/> CVB/CTB                |
| <input type="checkbox"/> Historical Museum  | <input type="checkbox"/> Historical Society | <input type="checkbox"/> Natural History Museum |
| <input type="checkbox"/> University         | <input type="checkbox"/> Zoo                | <input type="checkbox"/> Other _____            |

**Please indicate the areas of professional focus that describe your position the best. Rank them 1 (most important) to 3 (least important).**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Administration   | <input type="checkbox"/> Archival                       | <input type="checkbox"/> Board Member   |
| <input type="checkbox"/> Conservation     | <input type="checkbox"/> Curatorial                     | <input type="checkbox"/> Education      |
| <input type="checkbox"/> Exhibits         | <input type="checkbox"/> Gift Shops                     | <input type="checkbox"/> Marketing      |
| <input type="checkbox"/> Registration     | <input type="checkbox"/> Research                       | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Visitor Services | <input type="checkbox"/> Other(s) please specify: _____ |   |

**Dietary Restrictions?**

We will do our best to accommodate any dietary restrictions, but make no guarantees. Most meals will be buffet style with plenty of choices.

\_\_\_\_\_

# REGISTRATION & PAYMENT INFORMATION

All registrations must be paid by check or purchase order. Make checks payable to *Kansas Museums Association*. Send both pages of the completed registration form accompanied by payment to:

**KMA  
2009 Conference  
P.O. Box 1946  
Salina, KS 67402-1946**

You will receive an email confirmation that your registration was received and updates on the conference up until the conference dates. If you do not receive a confirmation within two weeks of mailing your registration, please inquire. KMA is not responsible for registrations that were mailed but never received. Please review the essential information regarding KMA Conference policies on page 15.

**THANK YOU!**

Registration	\$ _____
Events	\$ _____
Scholarship Donation	\$ _____
Membership	\$ _____

**TOTAL** \$ \_\_\_\_\_

**OFFICE USE ONLY:**

pm: \_\_\_\_\_ amt: \_\_\_\_\_  
ck: \_\_\_\_\_  
conf: \_\_\_\_\_ wk: \_\_\_\_\_  
inst: \_\_\_\_\_ ind: \_\_\_\_\_  
nm: \_\_\_\_\_ kac: \_\_\_\_\_