

**CONFERENCE REGISTRATION FORM**

Copy and mail to: TSRCC REGISTRAR  
,  
107 E Wm David Pky  
Metairie, LA 70005

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

AARC number: \_\_\_\_\_

Mailing address: \_\_\_\_\_

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

e-mail: \_\_\_\_\_

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

Hosp/Business: \_\_\_\_\_

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

**Attach a copy of AARC membership card to this form. Or sign for new AARC Membership included in non-member registration fee.**

**Signature** \_\_\_\_\_

<b>FEES:</b>	<u>ADVANCE</u>	<u>ON SITE*</u>	<u>Advance DAILY</u>
AARC/ANA member	\$135	\$150	Wed \$45/50 Thu \$75/85 Fri \$35/40
Non- Member	\$245	\$270	Wed \$75/95 Thu \$85/120 Fri \$45/50
Student member**	\$60	\$70	
Spouse***	\$55	On site fees will be posted	
ADDITIONAL FEES: NSF CHECK \$25    2 <sup>nd</sup> Certificate \$5			

**\* On-site Registration - cash or money order only**

\*\* A letter must accompany student registration from the program director attesting to a student status. CRCEs will not be given to those registered as students.

\*\*\* Spouse registration only covers attendance to special functions. **Husband and wife seeking CRCEs for state licensure must each pay a separate registration fee.**

Spouse's name (if registered to attend special functions). \_\_\_\_\_