

The Missouri Bluebird Society invites you attend the 12th Annual
Missouri Bluebird Conference
July 15th & 16th, 2017
Warsaw, MO 65355

Warsaw Community Building, 818 W. Harrison (downtown Warsaw)
 See our website for Map & Directions or call 816-331-2888 or 816-716-5387 for directions and
 Conference Information--Larry Dobson, Conference Chair
www.missouribluebird.org

Registration for the 2017 Missouri Bluebird Society Conference

Please make Checks payable to:

The Missouri Bluebird Society and mail to: Missouri Bluebird Society/ P.O. BOX 105830 /Jefferson City, MO 65110

Name(s) _____

Street Address : _____

City: _____ State: _____ Zip Code _____

Phone Number _____ Email : _____

**Lunch on Saturday, July 15th, a "Bluebird Information Packet", and all Saturday Presentations
 are included in your Conference Registration Fee**

(Lunch will include drink, dessert, and main course. No advance reservations are required for Lunch
 aside from your paid Conference Registration)

Conference Registration Fees:

Number of Missouri Bluebird Society Members attending _____ X \$18.00/person = \$ _____

Number of Non-members attending: X \$25.00/person = \$ _____

Number of Children under 12 years of age attending with a paid adult X \$13.00 per child = \$ _____

An OPTIONAL Friday Evening Dinner & Social is scheduled for July 14, 2017

Number of people attending the Friday Dinner and Social: _____ X \$20.00 = \$ _____

Number of Non-members attending the Friday Dinner and Social: _____ X \$30.00 = \$ _____

(There will be a special Program during dinner, Bob & Judy Peak: "White Bluebird Eggs")

TOTAL amount enclosed for Conference Fees/optional Friday Dinner:.. \$ _____

- **Saturday Evening Picnic:** *No Additional Charge (with your paid conference registration) however
 it is very important to register to attend.Number attending: _____*

Please Note that the conference registration fee does NOT include membership dues

Not yet a Missouri Bluebird Society Member??? Join now and save on your Bluebird
 Conference Registration Fee!

(Please enclose check for dues with this membership application)

Name _____

Address _____

Phone _____

Email: _____

Membership Levels:

(Mail check to: PO Box 105830/Jefferson City, MO 65110)

_____ Individual one year membership \$9.00

_____ Individual two year membership \$16.00

_____ Family one year membership \$15.00

_____ Family two year membership \$28.00

_____ DONOR (Annual) \$50.00

_____ SUPPORTER (Annual) \$100.00

County _____