

February 1 - 2, 2024 • The Natchez Grand Hotel

## 2024 Winter Conference Delegate Registration

Name:	Badge Name:		
Spouse/Guest:	Badge Name:		
Agency/Company Name:			
Address:	_ City:	State: _	Zip:
Phone: E-mail address	i:		
☐ Agent ☐ Company Representati			
☐ I would like information on membership in PIA of Louisi	iana. 🚨 I would I	ike information on membe	ership in YIPs of Louisiana.
Hotel Reser	vation & Roo	m Rates	
Standard room ra Dates of Stay Available: 1/31-2/3 (Che	•		servation needs.)
Book your room today by calling <b>The Natchez Grand</b> Name: " <b>YIP2024</b> ". Standard room rate is <b>\$119 per ro</b> while supplies last. Space is limited, so be sure to book <b>Hotel Cancellation Policy:</b> Cancellations must be material cancellation penalties and fees. Unscheduled early described.	<b>Dom per night.</b> Re bk your room as ear ade a minimum of 7	servation deadline is 0 ly as possible. 2 hours prior to schedu	1/16/24. Room availability uled arrival to avoid
Confere	nce Registra	tion	
Conference Registration Includes: Continuing Education Classes • Opening Reception with Exhibitors Downtown Event • Annual Membership Meeting • Cocktail Break • Lunch			
**Downtown Event - The cost for this event is included in your re we need to know if you're coming. Pl	gistration. However, i	n order to prepare for all o	
YIPs Cancellation Policy: Cancellations receiv No refunds will be made after that time due to			
Conference Registration: YIPs of Louisiana Member Non-YIP Member	<b>Before 1/12</b> \$125 \$150	After 1/12 \$150 \$175	TOTAL \$ \$
** I will attend the Downtown Event  Yes	No		
Additional Registration:			
Guest Registration (Excludes CE) *College Student Registration	\$ 90 \$ 50	\$100 \$ 60	\$ \$
*College Student Conference Registration inclu	·	ents and a 1 year Free YIPs	Membership
Registration Total:			\$
Paymo	ent Information	on	
I Prefer To Pay By: ☐ Check payable to YIPs of Lo	ouisiana 🔲 Visa	☐ MasterCard	□ AMEX
Credit Card #:	Exp	Expiration Date: Security Code:	
Name as it appears on card:	Sig	Signature of cardholder:	
Billing address:		State: Zip:	