

# 2011 Vendor Registration

Please complete the following form and return to the MSIA.  
(Please type or print clearly!)

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

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

Names of Additional Staff: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

*Products and Services:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please circle and fill in your options and totals

1A: Registration-----Regular \$100

OR

1B: Discount Raffle Option-----Regular \$50

2: Additional representatives-----# of additional \_\_\_ X's \$25=\$\_\_\_\_\_

3: Wednesday lunch-----# of tickets \_\_\_ X's \$13.50=\$\_\_\_\_\_

Thursday lunch-----# of tickets \_\_\_ X's \$15=\$\_\_\_\_\_

Thursday banquet-----# of tickets \_\_\_ X's \$32=\$\_\_\_\_\_

4: Additional tables-----# of additional \_\_\_ X's \$25=\$\_\_\_\_\_

Grand Total-----\$\_\_\_\_\_

Please email this form to [steven-singer@mosia.com](mailto:steven-singer@mosia.com) or faxed to Stacy Bax at (573) 522-6259. Payment and registration form may be mailed to: MSIA, PO Box 114, Jefferson City, Mo 65102. If you opt to fax or email/fax your registration, payment may be made at check in. Please make checks payable to Missouri State Investigators association.