

Personal Information

Name _____

Email Address _____

(Please double-check the accuracy of your email address. For MPCA/ACA use; we won't distribute it.)

Business Address (Use this address: _____)

Department _____

Institution _____

Street _____

City/State _____

ZIP or Postal Code _____

Home Address (Use this address: _____)

Home Address (Use this address: _____)

Street _____

City/State _____

ZIP or Postal Code _____

Phone (with area code) _____

Fax (with area code) _____

Conference and Membership Fees

Printed Program deadline: membership fees are due by 15 August 2018

All fees must be postmarked or paid online by the 1st of September 2018 to avoid a late fee.

All conference participants must be members of MPCA/MACA and must pay the registration fee.

Badge and receipt will be available for pickup at the conference.

Circle one if applicable: Student Retired Unemployed

Are you attending the Saturday Lunch and Annual Meeting? Y / N

Are you attending the Saturday Evening Events and Guest Speaker? Y / N

Registration Fee: \$180 for faculty and other professionals; \$170 for student, retired, or unemployed \$ _____

Membership Fee: \$80/year for faculty and other professionals; \$65/year for student, retired, or unemployed \$ _____

Printed Program deadline: Membership fees are due by the 1st of September to be included in the printed program.

Membership is for calendar year 2018 but must be postmarked by September 1st 2018 to avoid late fee if you attend the conference; membership fee is due with this registration form unless you have already paid.

Late Fee: \$15 on-site or mailed after 1 September 2018 \$ _____

This fee is waived for participants who live outside the United States.

Total due: \$ _____

Payment Method (circle one): **Check/Money Order***
(Enclose, payable to MPCA)

Credit Card**
**(Not available using paper registration form)

* **Payments sent in the mail** must be drawn on US bank or International Money Order and made payable to **Midwest Popular Culture Association.**

Send this form and payment (payable to MPCA) to:

Malynda Johnson
200 North Seventh Street
Terre Haute, Indiana, USA 47809-1902