



LOUISIANA ASSOCIATION *of* MUSEUMS

Registration Form
2008 LAM Annual Conference
April 20-21
Museum Day at the Capitol Baton Rouge
April 22

Please use a separate form for each delegate. If you need extra forms, please copy this form. Mail completed form and payment to: LAM Annual Conference, PO Box 4434, Baton Rouge, LA 70821. For more information, call the LAM office at 225-383-6800 or toll free at 1866-915-4LAM (4526) or email to: info@louisianamuseums.org

Name & professional title _____

Institution _____

Mailing address (P.O. Box/Street, City, State, Zip) _____

Phone () _____ **Fax** () _____ **Parish** _____

E-mail _____

Please check all that apply:

I am an individual LAM member My institution is a LAM member

I am a new LAM member Student

Register me for the following (Please do *not* include your payment to the hotel)

Sunday, Monday, and Tuesday full conference (includes events)

LAM Member \$125

Non LAM Member \$150 (includes individual membership)

Students \$10 with Student ID (mark dates below; does not include meals or socials)

Full Conference

Sunday \$30

Monday \$50

Museum Day at the Capitol only \$50

Awards Luncheon \$30

Monday Evening Reception \$35

Payment: Total amount \$ _____

Check, payable to LAM, enclosed I prefer to pay by MasterCard Visa

Card number _____ **Expiration date** _____

Name on card _____

Card billing address (P.O. Box./Street/ City, State, Zip) _____

Signature _____

**Please Copy This Form For Your Staff Members,
Board, and Volunteers.**