

THE VIRGINIA SELF-INSURERS ASSOCIATION, INC. (VSIA)
MEETING REGISTRATION FORM



Please register the following to attend VSIA's Annual Meeting on December 5-6, 2018:

Name (please print)

Name (please print)

Name (please print)

Name (please print)

Employer and contact telephone number

Check one:

2018 Dues Paid Active Member (\$175.00 per person for up to 4 individuals enclosed)

2018 Dues Paid Government Member (\$175.00 per person for up to 4 individuals enclosed)

2018 Dues Paid Associate Member (\$175.00 per person for up to 2 individuals enclosed)

Additional Member Rep./Non-Member (\$250.00 per person enclosed)

LATE REGISTRATION FEE (APPLIES AFTER 11/14/18) – ADD \$20 TO ABOVE-LISTED FEES

⇒ **PLEASE INDICATE THE NUMBER OF PERSONS ATTENDING THE RECEPTION ON DECEMBER 5, 2018:** _____

⇒ **APPLICATION FOR MEMBERSHIP ATTACHED FOR ENTITIES INTERESTED IN JOINING VSIA**

PLEASE EITHER PAY AND REGISTER ON-LINE AT VASELFINSURERS.ORG OR RETURN REGISTRATION FORM, CHECK MADE PAYABLE TO "VSIA", AND, IF APPLICABLE, TABLE TOP DISPLAY AND APPLICATION FOR MEMBERSHIP BY NOVEMBER 14, 2018, TO:

*John T. Heard, Legislative Counsel
The Virginia Self-Insurers Association, Inc.
2924 Emerywood Parkway, Suite 202
Richmond, VA 23294
Telephone: (804) 249-2235
Facsimile: (804) 747-5022*