

2025 MISSISSIPPI COUNSELING ASSOCIATION CONFERENCE

November 5 - 7,2025



Cadence Bank Arena, Tupelo, Mississippi Can't Help Falling in Love with Counseling

Very Important: If your membership renewal date is before November 1, 2025, you MUST renew your membership before your conference registration can be processed. Form for schools and/or school districts registering and paying for multiple people using the <u>same payment method</u>. We do not accept purchase orders.

MCA Membership must be current at the time of registration. See statement above concerning membership. Student members must be current college counseling students and must be current student members of MCA. Place an "x" in the correct blank.				
Name of Attendee #1:				
School/Business/Agency:				
Preferred Mailing Address:				
Email:	Telephone:			
Mark One of the Following:				
Regular Member \$299:	Retired Member \$299: _	Student Member \$110:		
Everyone Else Must Pay the No	on – Member Rate of \$450	:		
Indicate if your membership ne	eds renewal, and if it does	mark which type of membership:		
My Membership is up to date:	I need to renew m	y membership: as a		
Regular Member \$125:	Student Member \$50:	Retired Member \$70:		
Please select one option for the	Thursday Luncheon:			
Gluten Free: Vegan:	Vegetarian:	Regular:		
I will not need a lunch:				
Cost of Registration:	Cost of Membership	o (if necessary): =		
		Total Cost:		
Continued Next Page				

Name of Attendee #2:			
School/Business/Agency:			
Preferred Mailing Address:			
Email:Telephone:			
Mark One of the Following:			
Regular Member \$299: Retired Member \$299: Student Member \$110:			
Everyone Else Must Pay the Non – Member Rate of \$450:			
Indicate if your membership needs renewal, and if it does mark which type of membership:			
My Membership is up to date: I need to renew my membership: as a			
Regular Member \$125: Student Member \$50: Retired Member \$70:			
Please select one option for the Thursday Luncheon:			
Gluten Free: Vegan: Vegetarian: Regular:			
I will not need a lunch:			
Cost of Registration: Cost of Membership =Total Cost:			
Name of Attendee #3:			
School/Business/Agency:			
Preferred Mailing Address:			
Email:Telephone:			
Mark One of the Following:			
Regular Member \$299: Student Member \$110:			
Everyone Else Must Pay the Non – Member Rate of \$450:			
Indicate if your membership needs renewal, and if it does mark which type of membership:			
My Membership is up to date: I need to renew my membership: as a			
Regular Member \$125: Student Member \$50: Retired Member \$70:			
Please select one option for the Thursday Luncheon:			
Gluten Free: Vegan: Vegetarian: Regular:			
I will not need a lunch:			
Cost of Registration:			

Name of Attendee #4:			
School/Business/Agency:			
Preferred Mailing Address:			
Email:Telephone:	Telephone:		
Mark One of the Following:			
Regular Member \$299: Student Member	er \$110:		
Everyone Else Must Pay the Non – Member Rate of \$450:			
Indicate if your membership needs renewal, and if it does mark which type of m	embership:		
My Membership is up to date: I need to renew my membership:	as a		
Regular Member \$125: Student Member \$50: Retired Member	er \$70:		
Please select one option for the Thursday Luncheon:			
Gluten Free: Vegan: Vegetarian: Regular:			
I will not need a lunch:			
Cost of Registration: Cost of Membership =Total Co			
Name of Attended #5.			
Name of Attendee #3:			
Name of Attendee #5: School/Business/Agency:			
School/Business/Agency:			
School/Business/Agency: Preferred Mailing Address:			
School/Business/Agency: Preferred Mailing Address: Email:Telephone:			
School/Business/Agency: Preferred Mailing Address: Email:			
School/Business/Agency: Preferred Mailing Address: Email:Telephone: Mark One of the Following: Regular Member \$299: Student Member	er \$110:		
School/Business/Agency: Preferred Mailing Address: Email:Telephone: Mark One of the Following: Regular Member \$299: Student Member \$299: Student Member Everyone Else Must Pay the Non – Member Rate of \$450:	er \$110:		
School/Business/Agency: Preferred Mailing Address: Email:Telephone: Mark One of the Following: Regular Member \$299: Student Member \$299: Student Member Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark which type of membership needs renewal.	er \$110: embership: as a		
School/Business/Agency: Preferred Mailing Address: Email:Telephone: Mark One of the Following: Regular Member \$299: Student Member \$299: Student Member Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark which type of many Membership is up to date: I need to renew my membership:	er \$110: embership: as a		
School/Business/Agency: Preferred Mailing Address: Email: Telephone: Mark One of the Following: Regular Member \$299: Retired Member \$299: Student Member Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark which type of many Membership is up to date: I need to renew my membership: Regular Member \$125: Student Member \$50: Retired Member	er \$110: embership: as a		
School/Business/Agency: Preferred Mailing Address: Email: Telephone: Mark One of the Following: Regular Member \$299: Retired Member \$299: Student Member Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark which type of m My Membership is up to date: I need to renew my membership: Regular Member \$125: Student Member \$50: Retired Member Please select one option for the Thursday Luncheon:	er \$110: embership: as a		

Name of Attendee #6:				
School/Business/Agency:				
Preferred Mailing Address:				
Email:				
Mark One of the Following:				
Regular Member \$299: Retired Member \$299: Student Member \$110:				
Everyone Else Must Pay the Non – Member Rate of \$450:				
Indicate if your membership needs renewal, and if it does mark which type of membership:				
My Membership is up to date: I need to renew my membership: as a				
Regular Member \$125: Student Member \$50: Retired Member \$70:				
Please select one option for the Thursday Luncheon:				
Gluten Free: Vegan: Vegetarian: Regular:				
I will not need a lunch:				
Cost of Registration: Cost of Membership =Total Cost:				
Name of Attendee #7:				
School/Business/Agency:				
Preferred Mailing Address:				
Email:Telephone:				
Mark One of the Following:				
Regular Member \$299: Retired Member \$299: Student Member \$110:				
Everyone Else Must Pay the Non – Member Rate of \$450:				
Indicate if your membership needs renewal, and if it does mark which type of membership:				
My Membership is up to date: I need to renew my membership: as a				
Regular Member \$125: Student Member \$50: Retired Member \$70:				
Please select one option for the Thursday Luncheon:				
Gluten Free: Vegan: Vegetarian: Regular:				
I will not need a lunch:				
Cost of Registration:				

Name of Attendee #8: School/Business/Agency: Preferred Mailing Address: Email:	Student Member \$110: which type of membership: bership: as a
Preferred Mailing Address: Telephone: Mark One of the Following: Regular Member \$299: Retired Member \$299: Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark was My Membership is up to date: I need to renew my membership are select one option for the Thursday Luncheon: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regulation is provided in the control of t	Student Member \$110: which type of membership: bership: as a
Email:	Student Member \$110: which type of membership: bership: as a
Mark One of the Following: Regular Member \$299: Retired Member \$299: Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark was My Membership is up to date: I need to renew my membership is up to date: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regular I will not need a lunch: Cost of Registration: Cost of Membership	Student Member \$110: which type of membership: bership: as a
Regular Member \$299: Retired Member \$299: Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark volume My Membership is up to date: I need to renew my member Regular Member \$125: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regular I will not need a lunch: Cost of Registration: Cost of Membership	which type of membership: bership: as a
Everyone Else Must Pay the Non – Member Rate of \$450: Indicate if your membership needs renewal, and if it does mark von My Membership is up to date: I need to renew my member Regular Member \$125: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regular I will not need a lunch: Cost of Registration: Cost of Membership	which type of membership: bership: as a
Indicate if your membership needs renewal, and if it does mark v My Membership is up to date: I need to renew my member Regular Member \$125: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regular I will not need a lunch: Cost of Registration: Cost of Membership	which type of membership: bership: as a
My Membership is up to date: I need to renew my member Regular Member \$125: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regular Will not need a lunch: Cost of Registration: Cost of Membership	bership: as a
Regular Member \$125: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regular I will not need a lunch: Cost of Registration: Cost of Membership	
Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regul I will not need a lunch: Cost of Registration: Cost of Membership	Retired Member \$70:
Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regul I will not need a lunch: Cost of Registration: Cost of Membership	
I will not need a lunch: Cost of Registration: Cost of Membership	
Cost of Registration: Cost of Membership	ar:
Name of Attendee #9:	=Total Cost:
School/Business/Agency:	
Preferred Mailing Address:	
Email:Telephone:	
Mark One of the Following:	
Regular Member \$299: Retired Member \$299:	Student Member \$110:
Everyone Else Must Pay the Non – Member Rate of \$450:	
Indicate if your membership needs renewal, and if it does mark v	which type of membership:
My Membership is up to date: I need to renew my membership is up to date:	
Regular Member \$125: Student Member \$50:	
Please select one option for the Thursday Luncheon:	
Gluten Free: Vegan: Vegetarian: Regul	
I will not need a lunch:	ar:
Cost of Registration: Cost of Membership	ar:
Regular Member \$125: Student Member \$50: Please select one option for the Thursday Luncheon: Gluten Free: Vegan: Vegetarian: Regul	

Name of Attendee #10:	
School/Business/Agency:	
Preferred Mailing Address:	
Email:	Telephone:
Mark One of the Following:	
Regular Member \$299: Retired	Member \$299: Student Member \$110:
Everyone Else Must Pay the Non – Mem	ber Rate of \$450:
Indicate if your membership needs renew	al, and if it does mark which type of membership:
My Membership is up to date: I	need to renew my membership: as a
Regular Member \$125: Student	Member \$50: Retired Member \$70:
Please select one option for the Thursday	Luncheon:
Gluten Free: Vegan: Ve	getarian: Regular:
I will not need a lunch:	
Cost of Registration: Cost o	f Membership =Total Cost:
If you wish to register more than ten a Fotal Due on Page 1: Fotal Due on Page 2: Fotal Due on Page 3: Fotal Due on Page 4: Fotal Due on Page 5: Fotal Due on Page 6:	ttendees, you will need to complete additional forms.
Total Due from All Pages Combined:	
All checks should be made payable to this completed form to:	Mississippi Counseling Association and mailed with
MCA Conference Registration, PO Bo	x 5827, Brandon, Mississippi, 39047

Your registration form(s) and check MUST be postmarked on or before <u>October 1, 2025.</u> Incomplete or late registration forms will not be processed.