

## 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.

concerning membership. Stu	e current at the time of registrudent members must be currentent members of MCA. Place an	t college counseling students	
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:	_	
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 No	on – Member Rate of \$450:	_	

Name of Attendee #3:				
School/Business/Agency:				
	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:				
Name of Attendee #4:				
School/Business/Agency:				
Preferred Mailing Address:				
	Telephone:			
Email:	Telephone	e:		
Email: Mark One of the Following:	Telephone	»:		
Mark One of the Following:	Telephone  Retired Member \$299:			
Mark One of the Following:  Regular Member \$299:		Student Member \$110:		
Mark One of the Following:  Regular Member \$299:	Retired Member \$299:	Student Member \$110:		
Mark One of the Following:  Regular Member \$299:  Everyone Else Must Pay the No.	Retired Member \$299:	Student Member \$110:		
Mark One of the Following:  Regular Member \$299:  Everyone Else Must Pay the No	Retired Member \$299: on – Member Rate of \$450:	Student Member \$110:		
Mark One of the Following:  Regular Member \$299:  Everyone Else Must Pay the No  Name of Attendee #5:  School/Business/Agency:	Retired Member \$299:on – Member Rate of \$450:	Student Member \$110:		
Mark One of the Following:  Regular Member \$299:  Everyone Else Must Pay the No  Name of Attendee #5:  School/Business/Agency:  Preferred Mailing Address:	Retired Member \$299:on – Member Rate of \$450:	Student Member \$110:		
Mark One of the Following:  Regular Member \$299:  Everyone Else Must Pay the No  Name of Attendee #5:  School/Business/Agency:  Preferred Mailing Address:	Retired Member \$299: on – Member Rate of \$450:	Student Member \$110:		
Mark One of the Following:  Regular Member \$299:  Everyone Else Must Pay the No.  Name of Attendee #5:  School/Business/Agency:  Preferred Mailing Address:  Email:  Mark One of the Following:	Retired Member \$299: on – Member Rate of \$450:	Student Member \$110:		

Name of Attendee #6:		
School/Business/Agency:		
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:	
Name of Attendee #7:		
Preferred Mailing Address:		
Email:	Telephone:	
Mark One of the Following:		
_	Retired Member \$299:	Student Member \$110:
Regular Member \$299:	Retired Member \$299:on – Member Rate of \$450:	
Regular Member \$299:		
Regular Member \$299:  Everyone Else Must Pay the No.		_
Regular Member \$299:  Everyone Else Must Pay the No	on – Member Rate of \$450:	
Regular Member \$299:  Everyone Else Must Pay the No	on – Member Rate of \$450:	
Regular Member \$299:  Everyone Else Must Pay the No  Name of Attendee #8:  School/Business/Agency:  Preferred Mailing Address:	on – Member Rate of \$450:	
Regular Member \$299:  Everyone Else Must Pay the No  Name of Attendee #8:  School/Business/Agency:  Preferred Mailing Address:	on – Member Rate of \$450:	
Regular Member \$299:  Everyone Else Must Pay the No  Name of Attendee #8:  School/Business/Agency:  Preferred Mailing Address:  Email:  Mark One of the Following:	on – Member Rate of \$450:	::
Regular Member \$299:  Everyone Else Must Pay the Normal Pay	on – Member Rate of \$450: Telephone	e: Student Member \$110:

Name of Attendee #9:		
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:	_
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 No	on – Member Rate of \$450:	_
-	an ten attendees, you will need	to complete additional forms.
Total Due on Page 1:		
Total Due on Page 2:		
Total Due on Page 3:		
Total Due on Page 4:		
Total Due from All Pages Com	bined:	
All checks should be made pay this completed form to:	able to Mississippi Counseling	Association and mailed with

MCA Conference Registration, PO Box 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.