



**School Nutrition Association of South Carolina
70th Annual State Conference Registration Form
October 12-14, 2023**



PLEASE TYPE OR PRINT CLEARLY

<p>WAYS TO REGISTER:</p> <p>1. MAIL: SNA of SC-Registration, PO Box 1795, Columbia, SC 29202.</p> <p>2. EMAIL: snasc@bellsouth.net</p> <p>3. AFTER October 6: Onsite registration only.</p> <p>CANCELLATIONS: Refunds, minus a \$75 administrative fee, will be made if you notify SNA of SC by emailing your request to snasc@bellsouth.net on or before September 15, 2023. No refunds after September 22nd.</p>	<p>Last Name: _____</p> <hr/> <p>First Name: _____</p> <hr/> <p>SNA No: _____</p> <hr/> <p>District: _____</p> <hr/> <p>Email address: _____</p> <hr/> <p>Check one: Director/Supervisor _____ Manager _____ Employee/Other _____</p> <hr/> <hr/>
---	---

SNA/SNA of SC Members	Non-Members (add Membership)																								
<p>Complete Conference Registration: <i>(Includes all general sessions, rotating sessions, expo, T-Shirt (must receive size by September 15th), Friday continental breakfast, Friday evening reception, Saturday breakfast, and Saturday banquet)</i> Please circle one. Early Bird-EB (Received on or before 9/15; Regular Rate-RR (received After 9/15 and before 10/01; Late Registration-LR and On-Site-OS (received after 10/01).</p>																									
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">EB</th> <th style="text-align: center;">RR</th> <th style="text-align: center;">LR & OS</th> </tr> </thead> <tbody> <tr> <td>Employees (Operators & Other) -----</td> <td style="text-align: right;">\$175.00</td> <td style="text-align: right;">\$210.00</td> <td style="text-align: right;">\$260.00</td> </tr> <tr> <td>Managers-----</td> <td style="text-align: right;">\$175.00</td> <td style="text-align: right;">\$210.00</td> <td style="text-align: right;">\$260.00</td> </tr> <tr> <td>District Supervisors/Directors-----</td> <td style="text-align: right;">\$200.00</td> <td style="text-align: right;">\$235.00</td> <td style="text-align: right;">\$285.00</td> </tr> <tr> <td>Friday Only-----</td> <td style="text-align: right;">\$100.00</td> <td style="text-align: right;">\$120.00</td> <td style="text-align: right;">\$130.00</td> </tr> <tr> <td>Saturday Only -----</td> <td style="text-align: right;">\$130.00</td> <td style="text-align: right;">\$150.00</td> <td style="text-align: right;">\$180.00</td> </tr> </tbody> </table>		EB	RR	LR & OS	Employees (Operators & Other) -----	\$175.00	\$210.00	\$260.00	Managers-----	\$175.00	\$210.00	\$260.00	District Supervisors/Directors-----	\$200.00	\$235.00	\$285.00	Friday Only-----	\$100.00	\$120.00	\$130.00	Saturday Only -----	\$130.00	\$150.00	\$180.00	<p><i>Non-Member registration (plus) Includes 1-year SNA membership</i></p> <p>Employees----\$47.00 Managers----\$52.00 D/S-----\$158.00</p>
	EB	RR	LR & OS																						
Employees (Operators & Other) -----	\$175.00	\$210.00	\$260.00																						
Managers-----	\$175.00	\$210.00	\$260.00																						
District Supervisors/Directors-----	\$200.00	\$235.00	\$285.00																						
Friday Only-----	\$100.00	\$120.00	\$130.00																						
Saturday Only -----	\$130.00	\$150.00	\$180.00																						

<p>PRE-CONFERENCE SESSION - Thursday, 10/12/2023 <i>Pre-registration is required. Session may be cancelled if minimum registrations are not received; registrants will be notified in advance. Check session if you plan to attend and include fee</i></p> <p><input type="checkbox"/> ServSafe (Thursday and Friday)—Add \$90 to cover the cost of the book and test.</p> <p><input type="checkbox"/> SNS Exam will be offered. Must register online at: www.schoolnutrition.org. Search for SNS Exam</p>	<p>SPECIAL FUNCTIONS:</p> <p>T-Shirt Size----- _____ <i>(Included and must be received by September 15th)</i></p> <p>Thursday Night Jubilee Reception-----\$50.00 Friday Night Welcome Reception Ticket for Guest -----\$30.00 Saturday Night Banquet Ticket for Guest -----\$50.00 Expo—Food Show-----\$25.00</p> <p>Name for Expo Guest Badge: _____</p>
---	--

<p>MAIL PAYMENTS TO:</p> <p>Joyce Lovett, Executive Director SNA of SC PO Box 1795 Columbia, SC 29202</p> <p>Questions?? Contact Joyce at: Phone: 803-331-8632 Email: snasc@bellsouth.net</p>	<p>PAYMENT INFORMATION:</p> <p>Payment Method: <input type="checkbox"/> Check - TOTAL AMOUNT ENCLOSED \$ _____ Make checks payable to: SNA of SC (EIN: 57-0689852)</p> <p><input type="checkbox"/> Credit Card (see attached form)</p>
---	--

PAYMENT INFORMATION

SNA of SC~~~~~EIN: 57-0689852
EMAIL TO: snasc@bellsouth.net

AUTHORIZATION TO MAKE CREDIT CARD CHARGE
All transactions will be handled with the utmost confidence.
Please do not fax this info unless you have confirmed that I am able to retrieve this document immediately.

This information is NOT saved for future transactions.

Complete ALL information. Please PRINT/TYPE except for signature. Thank you.

Charge to: <input type="checkbox"/> AmExpress <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA		
Credit Card Number:		
Expiration Date:	Amount to Charge: \$	
Purpose (Event): ANNUAL CONFERENCE 2023		
Name on Credit Card:		
District:		
Billing Address:		
City:	State:	Zip:
Telephone:		
Email Address: <i>(Receipt will be sent to this email address.)</i>		
Signature:		Date:
SNA of SC use only: Processed: <input type="checkbox"/> Yes <input type="checkbox"/> No Date: Initials:		

Email to: snasc@bellsouth.net

Mail to: SNA of SC, PO Box 1795, Columbia, SC 29202

Or

Check Enclosed ~~~~~Check Number _____ Amount \$ _____

Notes or other information:

Signature _____

Date _____