Return this form, completed with student and sponsor information, to [themss@themss.org](mailto:themss@themss.org) by March 1. Upon receipt, an invoice will be prepared and sent to the listed sponsor via their MSS membership profile. Payment can be made online with a credit card or via mail with a check. Please review the group rate eligibility at [themss.org/registration](http://themss.org/registration). Questions? [themss@themss.org](mailto:themss@themss.org)

**FEES**

Student Group Rate:

* 1-15 students ($300.00)
* 16-30 students ($500.00)
* 31+ students (determined by MSS)

**GROUP SPONSOR INFORMATION:**

|  |  |
| --- | --- |
| *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| *Date:* |  |
| *In an effort to reduce waste and our carbon footprint, we are asking attendees to select their preference regarding a paper copy of this year's program book.*  We would like hard copies of the program book.  We will use the mobile meeting app and do NOT need hard copies of the program book. | |

**STUDENT INFORMATION**

*Please complete the below information for all students in your group. If you need to extend the list beyond 15 students, please do so.* *All students will be entered into the MSS registration system and receive meeting information via the provided email. Please provide their name as they wish it to be printed on their name badge.*

|  |  |  |
| --- | --- | --- |
| *Student #1* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #2* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #3* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #4* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #5* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #6* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #7* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #8* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #9* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #10* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |

|  |  |  |
| --- | --- | --- |
| *Student #11* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #12* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #13* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #14* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |
| *Student #15* | *Name:* |  |
| *Email:* |  |
| *Institution:* |  |
| Pronoun Choice: | She/Her  He/Him  Ze/Zir  They/Them  Other |