**Agency:**

**Name of attendee(s):**

**Supervisor Name:**

**Phone:**

**Email:**

**Number attending banquet dinner and meal selection. Please choose Chicken, Beef or Vegan:**

If paying by check please make payment to Annual MVCI Association and mail to P.O. Box 72, Nicholson, GA 30565 and also send an email to Admin@mvci.org. Please include the registration form.

**Registration will be confirmed once payment has been received.**