



Kentucky Workers' Compensation Educational Association

2021 Annual Conference | December 9 & 10 | Louisville Marriott East

Attendee Registration

Company Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

REGISTRANT INFO:

Name: _____ Title: _____ Email: _____

Name: _____ Title: _____ Email: _____

Name: _____ Title: _____ Email: _____

Name: _____ Title: _____ Email: _____

FEE PER PERSON: \$175.00 through November 15 | \$200.00 starting November 16
Fee includes breakfasts, luncheon, cocktail reception, and continuing education credits as applicable.

TOTAL ENCLOSED: \$ _____

Any questions or comments, call Matthew Williams at 502-495-5040 or email matthew.williams@omca.biz.

Check enclosed payable to: KWCEA

Mail to: KWCEA
c/o OMCA
2211 Greene Way
Louisville, KY 40220

Ch # _____
Amt \$ _____

Visa MasterCard Discover

Card # _____ Exp Date _____

Card Amt \$ _____

Signature _____

CANCELLATIONS: PLEASE NOTE THERE WILL BE NO REFUND FOR REGISTRATION FEES IF CANCELLATION IS NOT RECEIVED AT LEAST THIRTY (30) DAYS PRIOR TO THE EVENT DATE.