



**Kansas Environmental Health Association**

2018 Spring Conference

April 19 and 20, 2018

The Bluemont - Manhattan, KS

**NAME:** \_\_\_\_\_

**ORGANIZATION:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**Conference Registration**

Member .....\$50.00 \$ \_\_\_\_\_

Non-Member .....\$70.00 \$ \_\_\_\_\_

2018 KEHA Membership Dues .....\$20.00 \$ \_\_\_\_\_  
(January 1, 2018 to December 30, 2018)

Scholarship Donation .....\$ \_\_\_\_\_

Jo Funk Memorial Fund ..... \$ \_\_\_\_\_

**TOTAL AMOUNT DUE**.....

(Money does NOT have to accompany form.)

\$

Please make sure information is complete and include one form for each person attending the conference.

Please send this registration form and/or payment to:

Beth Rowlands, KEHA Treasurer  
P O Box 1969  
Lawrence, KS 66044-1969  
Email: beth.rowlands@ks.gov  
Phone: 785-842-4600

**Administrative Use Only:**

\_\_\_\_\_  
Beth Rowlands, KEHA Treasurer

Date: \_\_\_\_\_

Amount: \_\_\_\_\_