



REGISTRATION FORM

Indiana Vector Control Association
45th Annual Conference
March 8th 2021

Virtual Conference via Webex Events

Email with conference link and password will be sent no later than March 5th.
Email is required for registration to this conference

Name: _____

Address: _____

Agency, Corporation, or School: _____

Telephone: _____ FAX: _____

E-Mail (Required) _____

Attendee	Qty	Vendor	Qty
Registration for Virtual Conf. - \$10		Sponsorship - \$100	

Total Amount Remitted: _____

Registration can be paid online at our website:

www.ivca.us

Make all checks payable to: *Indiana Vector Control Association*

****DEADLINE FOR REGISTRATION IS Friday, March 5, 2021****

Mail registration form and fees to:

Andrew Grau
IVCA Conference
4001 E 21st St
Indianapolis, IN 46218
(317) 221-7456
(317) 221-7445 fax
E-Mail: agrau@marionhealth.org