



**2010 NATIONAL CONVENTION – DETROIT
July 12-16**



CHAPTER FULL CONVENTION DISCOUNT

*NPM is offering a special discount to Chapters that send **ten or more NPM members** as full conference participants to the NPM 2010 National Convention.*

Chapter discount **\$248** *Without a group discount, advance convention registration fee for an NPM member is \$275.*

Stipulations

- Each registrant must be a parish or individual *member of NPM*.
- Each registrant must be a member of NPM Indianapolis Chapter
(e-mail Anne Hatton ahatn@earthlink.net if you are unsure of your local membership.)
- **Only one** discount per registrant
(*i.e., ChapterDiscount cannot be combined with Parish or Clergy/Musician Duo Discount*).
- No discount on Youth, Daily, Companion, or Child registrations.

Instructions

1. Complete a registration form for *each NPM member* registrant (The registration form for **printing** can be found online at <http://www.npm.org/>. Do not click on “register online now.”)
2. Enclose a check for \$248 made out to NPM Indianapolis for each registrant.
(If registering multiple members from one family, parish or institution registration fees may be combined in one check.)
3. If you need to join or update your membership to the **local** chapter you may send the membership form below with a **separate** check for \$10.
4. If you are not a national member of NPM go to <http://www.npm.org/> and click on “Membership” or call (240) 247-3000 for registration information.
5. Mail your convention registration form and check postmarked **no later than May 14** to
Anne Hatton
664 Spring Hills Dr.
Zionsville, IN 46077

INDIANAPOLIS CHAPTER NPM • 2009-2010 MEMBERSHIP FORM

Make your check for \$10 payable to Indianapolis NPM.

*Please clip and mail this form, along with your membership dues for the year, to:
Anne Hatton, NPM Chapter Director, 664 Spring Hills Dr., Zionsville, IN 46077*

Your Name _____

Your Title/Role _____

Name of Your Parish _____

Your Preferred Mailing Address _____

City, State, Zip _____

E-mail Address (if any) _____

Preferred Phone Number _____