 **DDS Meeting ~ April 12, 2024**

**Icicle Inn, Leavenworth WA**

**Spring Workshop ~April 13, 2024**

**Cascade High School, Leavenworth WA**

**Registration**

***PLEASE CIRCLE ONE OR BOTH:***

***This event will be the same price for members and non-members***

**NAME DISTRICT CHAPTER**

**SNA Member # PHONE ( ) ADDRESS**

**CITY ZIP EMAIL**

**DDS**

**$50**$50

**Spring Workshop**

**$50**

**Mail registration by 3/31/24 to**: WSNA, 26009 114th St Ct E

Buckley, WA 98321

**Credit card registrations should be completed on the *washingtonsna.org* website whenever possible.**

Questions: email Karen at kbrown@fpschools.org

**Refund & Returned Check Policy:** It is the policy of WSNA to grant a full refund up to two weeks prior to the workshop less a processing fee of $15. No refund will be allowed if the request is made after the meeting has taken place. A $15 fee will be assessed for returned checks.

* On-line at [*www.washingtonsna.org*](http://www.washingtonsna.org/) ***(Preferred)***
* Check (enclosed) Payable to WSNA ***(NO PURCHASE ORDERS)***
* Credit Card: Visa MasterCard Discover AmEx

Credit Card # Exp. Date Security Code ***Complete*** Billing Address:

Printed Name:

Authorized Signature