

Mid Year Conference Registration Form

Duplicate this form if necessary and return with your payment to:

LACP * 6767 Perkins Rd Suite 120* Baton Rouge, LA 70808

Phone: (225) 387-3261 * Fax (225) 387-3262

To register for the LACP Conference, complete this form and remit with payment to the above address.

Name: _____

Rank: _____

Department: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone :(____) _____ **Mobile:**(____) _____

Email: _____

Deadline for Early Registration February 24, 2026

☐ \$180 LACP Member Only

☐ \$200 LACP Member Late/Onsite Registration

☐ \$230 Non Member

☐ \$250 Non Member Late/Onsite Registration

☐ \$50 Retired Member

Make checks payable to LACP. Total amount enclosed \$_____

Please complete the following information to pay by credit card:

A processing fee will be charged for all credit card payments.

____ Visa ____ MC ____ AMEX ____ Disc

Name on Card _____

Card Number _____

Exp. Date _____ V. Code _____ (security code)

Signature _____

Email for Receipt _____

Receipt will be sent from Elavon