

women in
agriculture
regional conference

704 N Miami Ave • Marshall, MO 65340

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agriculture™
regional conference

March 15, 2013

ALL★STARS
Marshall, Missouri

The best of 10 years and more!

You won't want to miss the all-star red-carpet treatment as we celebrate our 10th with prime rib, a brass band, a few of our favorite past speakers, as well as some newcomers we're confident you'll enjoy! A celebration this big is sure to draw a crowd. Don't wait to reserve your seat!

Registration opens January 7, 2013

Conference
Partners

FSA



NRCS



UNIVERSITY OF MISSOURI
Extension

LINCOLN
University

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www.womeninag.net

★ \$20/person

★ Conference Location

Martin Community Center
1985 S Odell
Marshall, MO 65340

★ Registration Details ★

Three ways to register beginning January 7, 2013:

1. Mail registration form & payment to the Saline County SWCD, 704 N Miami Ave, Marshall, MO 65340
 2. Call 660.886.7447 ext 3
 3. Visit the Saline County USDA Service Center at 704 N Miami Ave in Marshall, MO
- Your registration is not secured until payment is received. Registrations will close once maximum capacity is reached. If maximum capacity is reached prior to the event, no registrations will be accepted at the door.
 - Registrations will not be accepted prior to 01/07/13.
 - Visa, MasterCard, & Discover are accepted.
 - Registration form is also available at www.womeninag.net
 - The Martin Community Center is accessible. Submit any requests for special accommodations when registering.

★ Agenda

8:00 am	Check-in & light breakfast
9:00	Susie O
10:15	Judge Hugh Harvey
11:10	Trent Loos
Noon	Lunch (prime rib!)
1:30	Dr. Temple Grandin

CUT

★ 2013 All-Star Registration Form

Submit form & payment to:
Saline County SWCD
704 N Miami Ave
Marshall, MO 65340

Number Attending _____ X \$20/person = \$ _____

Check
 MasterCard
 Visa
 Discover

Cardholder Name (as it appears on card) _____

Billing Address (as it appears on statement) _____

City/State/Zip _____

Credit Card Number _____

Expiration (mm/yy) _____ Code (from back of card) _____

Phone Number _____

Name _____

Street Address/PO Box _____

City/State/Zip _____

Phone and/or Email Address _____

Name _____

Street Address/PO Box _____

City/State/Zip _____

Phone and/or Email Address _____

For additional registrants, photocopy this form as needed, or download and print the registration form at www.womeninag.net

Signature of Cardholder _____
I authorize University of Missouri-Extension to charge my card for the amount indicated above.