

2024 Minnesota Municipal Clerks Institute (MMCI)

May 6-10, 2024

Name (First) (MI) (Last)
City of Employment Title/Position
Work Address
City State Zip Code
Phone Number Email

Birth Date MM/DD/YYYY (For CEUs/Transcript purpose only)

The information on this form is private data, used to identify and locate you. A \$25.00 late registration fee if received/postmarked after 4-22-2024

Registration Fees:

Member & Non-Member \$560 postmarked/received by April 22, 2024

Member & Non-Member \$585 postmarked/received after April 22, 2024

Please enroll me in the 2024 MMCI for: **Year One FULL** Year Two Year Three

I will be attending: (both included in registration fee): Monday night social Thursday night banquet

Additional Guest Banquet Ticket(s) - \$30.00 each Number of tickets:

City Population: Is your fire department volunteer: Yes No

If you are applying for a scholarship, register after you receive notification from the MCFOA of its decision.

I have received a MCFOA Scholarship in the amount of \$ Total amount due: \$

Payment Information:

Check or money Order in the amount of \$

Please bill my employer, reference Purchase Order Number

Cancellation Policy: Refunds, minus \$30 processing fee, if written cancellation received by April 22, 2024

List any dietary restrictions and/or food allergies:

Institute Policies

All curriculum hours are mandatory, and registrants who do not complete the required curriculum will not be allowed to advance to the next level towards graduation. There is a strict adherence to punctuality in each session and no cell phone calls or texting are allowed in the classroom. Attendance will be tracked. In rare instances related to emergencies, excused absences are allowed if approved by the Institute Director. These excused absences will require a "makeup assignment" that is provided by the Institute Director (who will collaborate with the instructor prior to the end of the programming).

Participants who fail to comply with attendance and punctuality requirements will not receive a certificate of completion.

I have read and agree to the Institute Policy

To register by mail, please print and mail to the address below. To register by email, please send to email address below.

NOTE - NEW MAILING ADDRESS

Mail: St. Cloud State University
355 5th Ave S
Attn: Roxann Neu
St. Cloud, MN 56301

Email: register@scsutraining.com
Phone: 320-308-4962

