

 **Design with Nature**
REGISTRATION FORM

Name _____

Address _____

City _____
State, Zip _____
Phone _____
E-mail _____

Conference accredited for Master Gardeners education credit.
Check with your county coordinator.

Registration Fee:

Member, Wild Ones & MASLA	\$40.00	\$ _____
Non-member	\$45.00	\$ _____

** Registration includes conference, exhibits and buffet lunch

Please register me as a Wild Ones member.

Enclosed is an additional \$30.00 \$ _____

TOTAL ENCLOSED \$ _____

Please make your check payable to "Wild Ones" and mail with a copy of this registration form to:

Brent Holm
15327 Lake Shore Avenue
Minnetonka, MN 55345

Thank you! We look forward to seeing you.