

**Security Traders Association of Los Angeles**  
**77th Annual Convention Registration Form**  
**March 23-25, 2012 La Quinta Resort and Club, La Quinta, California**

**Convention Registration - Early Deadline February 23rd ♦ Hotel Reservation Deadline February 23rd**

Name: \_\_\_\_\_ Badge Name(if different) \_\_\_\_\_  
Last First Middle Initial

Firm: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ email: \_\_\_\_\_

**Convention Registration - Additional Activity Fees**

	Early Registration	Late Registration (after Feb. 23)	
___ Local STALA Member	\$ 225.00	\$ 250.00	\$ _____
___ Spouse/Guest*	\$ 225.00	\$ 250.00	\$ _____
___ Name of Spouse/Guest _____			
___ STA Affiliate Member	\$ 250.00	\$ 275.00 Affiliate _____	\$ _____
___ Non STA Member	\$ 275.00	\$ 300.00	\$ _____
___ Complimentary: STA Officers, Governors, Affiliate Presidents, Buy Side			\$ <u>N/C</u>
___ Golf: <i>Indian Wells Golf Resort</i>	\$ 180.00	___ self ___ guest ___ Buy Side - complimentary	\$ _____
___ Tennis Tournament	\$ 40.00	___ self ___ guest	\$ _____
___ Pool Party	no charge	___ self ___ guest	\$ <u>N/C</u>
Children are welcome to attend the Pool Party Lunch @ \$10 ea: _____ # of children attending			\$ _____
___ Texas 50/50 Hold 'em Poker Tournament – to benefit Charity - \$100 per person			\$ _____
___ Blackjack 50/50 Tournament – to benefit Charity \$50 per person			\$ _____

Player/s Name/s \_\_\_\_\_

**Total Fees: \$ \_\_\_\_\_**

I will attend: \_\_\_ Friday Reception\* \_\_\_ Saturday Business Meeting\* \_\_\_ Saturday Dinner\* (\*adults only, please)

**Method of Payment: Please fill out your credit card information or include a check payable to STALA**  
**Stala accepts ONLY: \_\_\_ Visa \_\_\_ Mastercard \_\_\_ American Express**

Card #: \_\_\_\_\_ Exp. \_\_\_\_\_ Signature: \_\_\_\_\_

**Hotel Reservations – Deadline – February 23, 2012**

Hotel will **not** accept reservations directly from individuals. This form must be completed in order to receive a room reservation, and must be accompanied by form of payment indicated below, and must be received by 2/23

Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ email: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Accommodations: \_\_\_ Single /Double - \$299 Share with: \_\_\_\_\_

Suite information available upon request only - Please call (847) 673-2013. All rates are subject to current tax and hotel resort fees

**Payment: Mandatory** first night's deposit payable to: La Quinta Resort & Club, or guarantee to credit card

\_\_\_ Visa \_\_\_ MasterCard \_\_\_ American Express

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ Signature: \_\_\_\_\_

**CANCELLATION POLICY:** ROOM DEPOSITS ARE REFUNDABLE **ONLY** IF WRITTEN NOTICE OF CANCELLATION IS RECEIVED SEVEN DAYS PRIOR TO ARRIVAL, AND **ONLY** IF STALA IS ABLE TO RE-SELL YOUR ENTIRE ROOM RESERVATION. CANCELLATIONS MUST BE FAXED TO MFL ASSOCIATES, **NOT TO THE HOTEL**. **CANCELLATION OF CONFERENCE REGISTRATION MUST BE RECEIVED IN WRITING BY MARCH 15, 2012.** IF PAYING ALL FEES BY CREDIT CARD, YOU MAY FAX ENTIRE FORM TO (847) 674-7366, OR MAIL WITH YOUR CHECK TO: MFL ASSOCIATES, INC., 6540 NORTH KILBOURN AVENUE, LINCOLNWOOD, IL 60712

**OR YOU MAY REGISTER ON-LINE AT [www.stala.org](http://www.stala.org)**

FOR INFORMATION CALL CONFERENCE HEADQUARTERS AT: (847) 673-2013 OR EMAIL: [info@mflassociates.com](mailto:info@mflassociates.com)