



2020 Annual Training Conference
Stone Castle Hotel & Conference Center, Branson, MO
May 19, 20, 21, & 22, 2020

www.moia.org

Conference Information: The MOIA fee includes annual dues, continental breakfast, two lunches and one dinner. Each class offered will provide the attendee POST OR Continuing Education Credit. PI Continuing Education Credit has been submitted for approval to the Division of Professional Registration. To receive credit, the attendee must attend 100% of the class. All questions regarding the training curriculum should be addressed to Denetta Amor at damor@higginville.org or Larry Fish at lfish@clintoncosheriff.org

Who should attend? State Investigators, Law Enforcement Officers, Private Investigators, Security and Loss Prevention Managers, including administrative personnel assigned to those investigative/regulatory agencies.

Dress: Conference attire is casual. Remember to include appropriate clothing for after-hour activities (pool, hot-tub, dancing, golf, etc). If you are required to carry a weapon, please conceal it if possible.

Hotel Information: Stone Castle Hotel & Conference Center. Directions: Located off of Branson 76 Strip on Green Mountain Drive. The hotel address is 3050 Green Mountain Drive, Branson, MO 65616. Call 417-335-4700 for reservations and **ask for the MOIA rate.**

The room rate is \$80.00 per night.

<https://bransonstonecastle.com/>

Networking and Socials: In addition to the excellent training sessions, the conference provides opportunities to network with your peers from other agencies and make contacts that can be beneficial to carrying out your normal job duties. Some of the networking opportunities include golf, boating, swimming, dining, a BBQ and an evening hospitality suite. Bring your business cards to share.

Cancellation Policy: Registrations that are not cancelled by May 18, 2020, will be liable for the entire registration fee.



MOIA 2020 Conference Registration Form

- Please TYPE or PRINT ALL information -

Name: _____ Agency: _____

Agency Address: _____ Phone: (____) _____

City: _____ State: _____ Zip: _____

E-mail Address: (Agency or Private) _____

Please check if your name & agency address can be published in the conference attendance handout

REGISTRATION

- | <u>FEES</u> | <u>REGISTRATION TYPE</u> |
|-----------------------------------|--|
| <input type="checkbox"/> \$135.00 | Current MOIA Member – includes full conference, membership dues and POST credit |
| <input type="checkbox"/> \$150.00 | Non-Member – includes full conference, membership dues (if eligible to be a member) and POST credit |
| <input type="checkbox"/> \$75.00 | Only 1 day of conference, which includes lunch, membership dues and POST credit |
| | <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday (will you be staying for Banquet) |
| <input type="checkbox"/> \$50.00 | I can't attend the conference, but would like to renew/become a MOIA member |

Add-Ons

- No Charge Harvey Beach BBQ Tuesday Dinner
- \$15.00/each Spouse/Guest for Wednesday Lunch
- \$17.00/each Spouse/Guest for Thursday Lunch
- \$35.00/each Spouse/Guest for Banquet Dinner

Total: \$ _____ POST LICENSE #: _____

*All Conference attendees, including current members,
MUST complete a membership application.*

PAYMENT METHOD (Missouri State University is handling all invoicing and billing)

- Check enclosed Check forthcoming via mail Direct Bill
- Credit Card _____
- Expiration Date: ____/____/____ 3-digit security code (from back of card) ____

Direct Bill Conference Fee To: Email or Mailing Address Below:

Contact Name: _____

Title: _____ Phone: _____

Department: _____

Billing address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

MAKE CHECKS PAYABLE TO:

Missouri State University

MAIL TO:

Missouri State University

901 S. National Ave., Alumni 314

Springfield, MO 65897

FAX TO CODY BREWINGTON AT 417-836-4544 OR CALL 417-836-8974 WITH QUESTIONS

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OFFICE USE ONLY

22Date Rec'd: _____ Amount Rec'd: _____ Check #: _____ Receipt #: _____ Mbr. Type: _____

MOIA MEMBERSHIP APPLICATION

- Please **TYPE** or **PRINT ALL** information -



The Missouri Investigators Association was organized to promote the free exchange of inter-agency information necessary to effectively carry out the work of association members; provide continuing educational opportunities for government personnel engaged in investigative work and enhance the status of governmental investigative work as a profession. The organization is organized exclusively for educational, fraternal and professional purposes

Membership status is determined by the Membership Committee upon approval of the Membership Application. Membership shall be made available without regard to race, sex, color, creed, or national origin and to any qualified applicant who subscribes to the purposes of the organization. Membership dues are paid annually, and fees are determined by membership status. The fiscal year runs from July 1st through June 30th.

Regular Membership shall be granted to individuals who are non-commissioned State investigators, State investigative support personnel, law enforcement officers, private investigators, security and loss prevention managers. Dues are \$50.00.

NAME: _____

DEPARTMENT: _____

DIVISION: _____

AGENCY: _____

JOB TITLE: _____ DATE OF EMPLOYMENT: _____

MAILING ADDRESS: _____

DOB: _____ PHONE: (work) _____ (home) _____

PREFERRED MAILING ADDRESS (MOIA prefers to do most correspondence via e-mail due to mailing costs):

E-MAIL ADDRESS: _____

MAILING ADDRESS: _____

FACEBOOK ACCT. ADDRESS: _____

DESCRIBE YOUR AGENCY'S FUNCTIONS AND HOW YOUR JOB DUTIES RELATE TO THE INVESTIGATIVE FUNCTIONS OF YOUR AGENCY:

I hereby certify that the statements I have made on this application are true and complete to the best of my knowledge and I agree to be bound by the rules of the Missouri Investigators Association.

SIGNATURE OF APPLICANT: _____ DATE: _____