### MISSISSIPPI ASSOCIATION OF SUPERVISORS

2022 MID-WINTER LEGISLATIVE CONFERENCE REFUGE CONFERENCE CENTER | JANUARY 11-13, 2022



#### COUNTY REGISTRATION INFORMATION

The MAS 2022 Mid-Winter Legislative Conference will be held <u>January 11 – 13, 2022</u> at the <u>Flowood Sheraton</u> Refuge Hotel and Conference Center located at *2200 Refuge Blvd., Flowood, MS 39232*.

#### **CANCELLATION POLICY FOR COUNTY OFFICIALS**

Due to hotel attrition policies and catering deadlines, MAS has adopted the following cancellation fee schedule.

- <u>Early Cancellation</u>: If notice of cancellation is received from date of registration to *December 1, 2021*, no cancellation fee will be assessed.
- <u>14-Day Cancellation</u>: If notice of cancellation is received *December 2 December 28, 2021*, a cancellation fee equal to <u>one-fourth (1/4)</u> of the registration cost will be assessed, based on original registration fee.
- <u>Late Cancellation</u>: If notice of cancellation is received *after December 28, 2021*, a cancellation fee equal to <u>one-half (1/2)</u> of the registration cost will be assessed, based on original registration fee.

#### **CONFERENCE HOTELS**

- Hotel blocks are open! Rates may not be available before November 1 or after cutoff date. Host Hotel block
  typically sells out within minutes! Once the Sheraton has sold out, we cannot add more rooms to the block.
- You must request MAS rate at the time reservation is made to guarantee block rates. Rates cannot be changed at check-in or check-out. Block rates are subject to sales tax and fees (vary by property).
- You must confirm required deposit, cancellation, check-out, tax exemption payment requirements and other policies with hotel. Sheraton Refuge Hotel requires you mail in your tax exemption letter and hotel room confirmation number and reservation name on the check to the Hotel prior to check-in.
- If using booking link, please confirm you have the correct dates entered, or Hotel may appear to be sold out if
  dates are entered incorrectly.

#### \*\* Visit MAS Website for Online Hotel Booking Links\*\*

Sheraton Refuge	Hotel
2200 Refuge Blvd., Flor	wood, MS 39232
Rate	\$184
Cutoff Date	December 10, 2021
Group Code	MAS20
Phone: 601.936.4550	)
Hilton Garden In	n
118 Laurel Cove, Flowo	ood, MS 39232
Rate	\$119
Cutoff Date	December 27, 2021
Group Code	MS Assn. of Supervisors
Phone: 601. 487.080	0

TownePlace by Marriott
160 East Metro Parkway, Flowood, MS 39232
Rate\$129-\$139
Cutoff Date December 20, 2021
Group Code MS Assn. of Supervisors
Phone: 601.882.9800
Home2 Suites by Hilton
105 Hospitality Drive, Flowood, MS 39232
Rate\$139
Cutoff Date December 11, 2021
Group Code MAS
Phone: 601.909.4000
Hampton Inn Flowood
115 Hospitality Drive, Brandon, MS 39232
Rate\$129
Cutoff Date December 11, 2021
Group Code MAS
Phone: 601.709.5200

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**MS Association of Supervisors** 

Mail to:



## **COUNTY OFFICIAL REGISTRATION FORM**

Attn: Stephanie Spangler

793 N. President Street		Fax to: 601.353.2	2749	
	lackson, MS 39202	Email to: Sspangler@massup.org		
County Name:		Purchase Order:	Date:	
Completed By:		Title:		
Registration Ra	ates: Rate based on date form	m is received in the MAS Office	. Pre-payment not required.	
Member*: \$27	<b>'5 Early Bird</b> (before Novemb	er 18) \$300 Regular (by Decen	nber 20)   <b>\$325 Late</b> Registration (after	
December 20)	\$375 Onsite Registration (January	anuary 3 – January 13, 2022)		
* Member rates	available for County Supervisors	s (Active Members) and Associate	Members only.	
Non-Member:	\$350 Regular (by December	20)   \$375 Late Registration (a	fter December 20   \$425 Onsite	
Registration (Ja	anuary 3 – January 13, 2022)			
	*** If you are a county er	mployee, you cannot register (	as a spouse/guest. ***	
Name (as prin	ited on name badge):			
Title/Office: _		Guest/Spouse Name:		
Name (as prin	ited on name badge):			
Title/Office: _		Guest/Spouse Name:		
Name (as prin	ited on name badge):			
Title/Office: _		Guest/Spouse Name:		
Name (as prin	ited on name badge):			
Title/Office: _		Guest/Spouse Name:		
Name (as prin	ited on name badge):			
Title/Office: _		Guest/Spouse Name:		
		* * * *		
Total Registrati	on Fees: \$	Check Enclosed (No	)   Bill County	
Bill to Attention	n:	Title:		
mail:		Phone:		