

Minnesota State Assembly of the Association of Surgical Technologists
Delegate/Alternate and/or MNSA Board Member Agreement
AST National Conference

Having been duly elected by the Minnesota State Assembly of the Association of Surgical Technologists, I, _____, agree to represent the MN State Assembly as a(n) Delegate/Alternate and/or MNSA Board Member at the National Conference of the Association of Surgical Technologists to be held on _____. The State Assembly agrees to provide financial assistance, if available, a(n) _____ stipend up to the amount of \$_____. Funds will be **reimbursed once the required expense receipts are submitted** within one week post-conference and reviewed by two or more executive MNSA officers. In exchange for the stipend reimbursement, I consent to attend and participate in all the following functions while at the National AST Conference:

- 1. Opening Ceremony**
- 2. All Business Sessions**
- 3. Candidates Forum**
- 4. Delegate Discussion following the Candidates Forum**
- 5. Voting (Delegates Only / Alternates nearby)**
- 6. All Delegates will sit in the designated area preassigned by Nationals.**
- 7. Write a summary to be submitted electronically to the MNSA Treasurer or MNSA President at mnast2016@outlook.com within one week post-Conference.**
- 8. Required expense receipts for hotel, airfare, one checked bag to and from, Conference Registration Fee(s), and transportation to and from the hotel, to be scanned and submitted electronically to the MNSA Treasurer or MNSA President at mnast2016@outlook.com within one week post-Conference. Reimbursement will not exceed the agreed-upon amount in the contract.**

Failure to abide by this agreement will entitle the MN State Assembly to deny any stipend reimbursement and disqualify me from serving as a Delegate or Alternate Delegate for the next two years.

AST Member # _____ Exp. Date _____

Printed Name _____

Signature _____ Date _____