

MASIT

MAS Insurance Trust

2025 LAW ENFORCEMENT RISK MANAGEMENT CONFERENCE SHERATON REFUGE HOTEL & CONFERENCE CENTER | FLOWOOD, MS AUG. 12-13, 2025

REGISTRATION INFORMATION

MASIT's 2025 Law Enforcement Risk Management Conference will be held **August 12-13, 2025**, at the **Sheraton Refuge Hotel & Conference Center at 2200 Refuge Blvd, Flowood, MS 39232**.

REGISTRATION OPENS: JUNE 2, 2025

County Officials/ Employees/ Guests*:

MASIT Member County \$295

MASIT Non-Member County \$395

REGISTRATION CLOSES: AUGUST 4, 2025

Agents/ Attorneys/ Vendors/ Other:

Per Person \$350

** Due to the nature of this event, Guests may register at the MASIT Non-Member County rate.*

CANCELLATION POLICY

Cancellation requests must be submitted by email to masit@massup.org no later than August 1, 2025. Requests received after August 1 will not be credited or refunded.

CONFERENCE HOTELS

- You must request MASIT 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 at the time reservation is made.
- 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.

Sheraton Refuge Hotel & Conference Center

2200 Refuge Boulevard, Flowood, MS 39232

Rate\$181

Cutoff Date.....July 11, 2025

Group CodeSI5

Booking Link..... tinyurl.com/2025LERM

Phone: 601.936.4550

Hilton Garden Inn

118 Laurel Park Cove, Flowood, MS 39232

Rate\$139

Cutoff Date.....July 15, 2025

Group CodeMASIT

Booking Link..... tinyurl.com/2025MASIT

Phone: 601.909.4000

Candlewood Suites

3810 Flowood Drive, Flowood, MS 39232

Rate..... \$126/\$149

Cutoff DateJuly 10, 2025

Group Code..... MAS

Booking Link..... tinyurl.com/2025MAS

Phone: 601.326.3600

**2025 LAW ENFORCEMENT RISK MANAGEMENT CONFERENCE
REGISTRATION FORM**

Mail to: MAS Insurance Trust
793 N. President Street
Jackson, MS 39202

Attn: Stephanie Spangler
Fax to: 601.353.2749
Email to: MASIT@massup.org

County/Company Name: _____ Purchase Order: _____

Completed By: _____ Title: _____

Full Name: _____ Title: _____ Email*: _____
Full Name: _____ Title: _____ Email*: _____
Full Name: _____ Title: _____ Email*: _____
Full Name: _____ Title: _____ Email*: _____

* Attendees must provide individual email address to receive certification form (no duplicate emails).

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☐ Send bill to: ☐ Check enclosed (Number: _____) ***Make check payable to MAS Insurance Trust.***

Billing Contact Name: _____ Title: _____

Billing Address: _____

Email: _____ Phone: _____

MASIT USE ONLY					
Date Rec'd		MS Inv		Paid Amt	
Amt Due		QB Inv		Check No	