

Registration Form

Building Capacity and Partnerships to Restore Michigan's Great Lakes Areas of Concern Under the Great Lakes Restoration Initiative

August 4, 2009 ~ Michigan State University Union ~ East Lansing, Michigan

① Your Background Information

Name: _____ Title: _____

Organization: _____ Area of Concern You Represent: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

② Registration

The workshop registration fee is \$40. Please indicate how you wish to pay.

_____ A check for \$40 payable to the Great Lakes Commission is enclosed.

_____ I will pay with my credit card Card type: _____ VISA _____ Mastercard
Name on card: _____
Card number: _____
Expiration date: _____

_____ Please register me now; I will pay on-site at the workshop.

③ Display Tables and Special Needs

_____ Display Table
_____ Vegetarian entree for lunch
_____ Other (please explain: _____)

④ Please mail or fax completed form by Friday, July 31 to:

Great Lakes Commission
Attn: Matt Doss
2805 South Industrial Highway, Suite 100
Ann Arbor, MI 48104
Fax: (734) 971-9150

⑤ Questions or Comments?

If you have questions about the workshop or would like additional information, contact:

Matt Doss
Great Lakes Commission
(734) 971-9135
mdoss@glc.org

Registration Deadline: Friday, July 31!