

Registration Form

(you may also register online at www.glc.org/stclair/conf2008)

4th Binational Lake St. Clair Conference
**Implementing Restoration and Protection Efforts
for the Heart of the Great Lakes**

March 19-20, 2008 ✧ MacRay Harbor ✧ Harrison Township, Michigan

1 Your Background Information

Name: _____ Title: _____

Organization: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Fax: _____ Email: _____

2 Conference Registration Fee

The conference registration fee is \$35. Please indicate how you wish to pay:

_____ A check for \$35 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 conference.

3 Breakout Sessions

Please indicate which breakout sessions you wish to attend (select one in each group):

Day One:

Breakout Group One (choose one)

_____ *Managing Phragmites: Lessons from the Great Lakes and Beyond*

_____ *Protecting Drinking Water from Lake St. Clair and the St. Clair River*

Breakout Group Two (choose one)

_____ *Monitoring for Bacterial Contamination in the Lake St. Clair Watershed: Current Efforts and Future Directions*

_____ *Options for Preventing Nutrient Enrichment in Lake St. Clair*

Breakout Group Three (choose one)

_____ *Lake Levels and Flows Affecting Lake St. Clair*

_____ *Conclusions and Recommendations of the Lake St. Clair Regional Monitoring Project*

Day Two:

Concurrent U.S. and Canadian Breakout Sessions (choose one)

_____ *U.S. Breakout Session: Key Initiatives for Advancing Implementation of Restoration and Protection Efforts in the U.S. Lake St. Clair Watershed*

_____ *Canadian Breakout Session: Moving Forward on the Implementation of Canada's Lake St. Clair Management Plan*

4 Other Requests and Special Needs

_____ Table for display or poster

_____ Vegetarian entree for Wednesday lunch

_____ Other (please explain: _____)

5 Please mail or fax completed form by **Friday, March 14** to:

Great Lakes Commission

Attn: Matt Doss

2805 South Industrial Highway, Suite 100

Ann Arbor, MI 48104

Fax: (734) 971-9150

Registration Deadline: Friday, March 14!