

SYMPOSIUM REGISTRATION FORM

HONIGMAN'S SECOND ANNUAL GREAT LAKES TRIBAL ECONOMIC DEVELOPMENT SYMPOSIUM

October 31 and November 1, 2007

Soaring Eagle Casino and Resort — 6800 Broadway — Mount Pleasant, MI 48858

Registration can be made by using this form or by registering online at www.honigmanted.com

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

1. Name: Mr. Mrs. Ms. _____ Title: _____

Email: _____

2. Name: Mr. Mrs. Ms. _____ Title: _____

Email: _____

Registration deadline: October 22, 2007 (For questions please contact Meeting Coordinators at 248.643.6590)

Registration Fees:

Per person fee: \$150.00 _____ (persons) x \$150.00 = _____

Register the above individual(s) totaling: \$ _____

Payment Method: Check enclosed for \$ _____ (Make check payable to Honigman) —OR—

Charge to (Select One): American Express MasterCard VISA

Security Code _____ (3-digit number on back of Visa/MasterCard or 4 digit number on front of Amex)

Card Number _____

Expiration Date _____

Name (as it appears on card) _____

Signature _____

HONIGMAN

Deloitte.



madigan/pingatore.com insurance services



Notes: Mail the completed Symposium Registration Form by October 22, 2007 to Meeting Coordinators, P.O. Box 99463, Troy, MI 48099 or fax to 248.643.9685 or email to honigman@meeting-coordinators.com. Substitutions are always welcome. Pay at the door registrants are held to the same registration fees as prepaid registrants.

Registrants are responsible for making their own travel and hotel arrangements and reservations.

Overnight accommodations are available for meeting attendees at the Soaring Eagle Casino and Resort. Please see the enclosed hotel reservation form, which can be completed and faxed to the Soaring Eagle Casino and Resort at 989.775.5686. For more information, contact the Soaring Eagle Casino and Resort at 888.732.4537.