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 Registrations can be made by using this form or by registering online at www.honigmanteds.com

Tribe/Company:				
Address:				
City:				
Phone:		Fax:		
1. Name: Mr Mrs Ms		Title:		
Email:				
2. Name: ☐ Mr. ☐ Mrs. ☐ Ms		Title:		
Email:				
Registration deadline: Octobe				
Registration Fees: Tribal Member: \$75.00		(persons) x \$7	5.00 =	
For questions and Group Rates contact	Meeting Coordinators (nt 248.643.6590		
Register the abov	ve individual(s) totalinç	j: \$		
Payment Method: Check enclosed fo	or \$ (Make	check payable to Honigman) -	-OR-	
Charge to (Select One): 🔲 American	Express	MasterCard	VISA	
Security Code (3-digit	number on back of Vis	a/MasterCard or 4 digit numb	er on front of Amex)	
Card Number		Expiration Date		
Name (as it appears on card)		Sianature		

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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.