## REGISTRATION FORM

## Annual Michigan Ear Institute Spring Conference • June 15-16, 2024

Name		MD/D0	Email:		
Address				Phone (	)
City			_State		Zip
		irand Traverse Resort a ons need to be made b			them you are with the
Registration I	Fee: \$100 Att	endings			
ACTIVITY OP	TIONS:				
Golf: Saturda	y, June 15, 2024	• Spruce Run, Grand others \$75 per pers	Traverse Re	sort • 1:00 p.	.m. Tee Time
#attending	Name(s)				_
	Name(s)				_
	Name(s)				_
**Course part	cicipants and fam Name(s) Name(s) Name(s)	_			
BBQ: Saturda		<b>00 p.m.</b> #attending	• • • • • • • • • • • • • • • • • • • •	Children _	
Michigan Ear Institute		MEI / Attn: Alison 30055 Northwest Farmington Hills, I	Devine ern Hwy., #1 MI 48334	101	Fax: 248-865-4121 to:
<b>Credit Card Aut</b>	horization	information shown bel			
Visa	Mastercard	Card number			Exp Date
CVV Code		_ Signature			