REGISTRATION FORM Annual Michigan Ear Institute Spring Conference • May 31 - June 1, 2025

Name				MD	/ DO / PA / NP / AuD / Resident
Address				Cit	.у
State	Zip	Phone	:()	Email:	
PLACE:	ACE: VanElslander Surgical Innovation Center • Providence Park Hospital 47601 Grand River, #B100 • Novi, MI 48374				
•			ttendings / NP / PA / Audiologists Its No Charge		
HOTEL R	•	at the Suburb	an Collection Sh	owplace - reservation y, Novi, MI 48374 - re	s 1-800-233-1234. eservations 1-248-349-4600
			-	t Creek Country Club • rge. All others \$100	
#attendi	ng N	lame(s)			
	Ν	lame(s)			
	Ν	lame(s)			
	Ν	lame(s)			
				TOTAL DUE (Reg	istration & Golf):
BBQ: S	aturday May	31, 2025 at (6:00 p.m No	Charge - Families ir	nvited
		#attendin	g Adul	ts Children	
Mail or fax registration to:		to:	MEI Attn: Alison De 30055 Northw Farmington Hil Fax #248-865-	estern Hwy., #101 Is, MI 48334	
	ard Authorizat uthorized to us		ormation shown	below for conference	registration fees.
	uthorized to us	e the card info		below for conference	-