SkillsUSA MICHIGAN

State Fall Leadership Conference Registration Form

November 12, 2008

Holiday Inn South, Lansing

Deadline: October 20, 2008 for early registration, no registrations will be accepted after October 30, 2008. This form must be returned along with the conference registration fees by the deadline date.

School_____ Phone _____

Address_____

City and Zip_____

Lead Advisor_____

Registration Fee:

Number of Early Registrations (Student & Adult) _____ x $30.00 = $0
For payments and forms received by October 20, 2008

Number of Regular Registrations (Student & Adult) _____ x $40.00 = $0
For payments and forms received after October 20, 2008
No registrations will be accepted after October 30, 2008
No refund requests will be accepted after October 30, 2008

Total Registration Fees Enclosed = $0

T-Shirt Size Summary:

_____ Small _____ Medium _____ Large _____XLarge _____XXLarge

Remember: One (1) Adult must attend for each twenty (20) Student Participants.

Mail to: SkillsUSA Michigan
Eastern Michigan University
Ypsilanti, MI 48197
734-487-3888 fax 734-487-4329 (Please send originals with the payment)

Make Check Payable to:
SkillsUSA Michigan

A Permission & Medical Treatment Authorization Form will be brought to the conference for each participant attending. All participants have read and signed the Participant Code of Conduct and Medical Treatment Authorization Form, and understand the Dress Code. The form is available at http://www.miskillsusa.org/forms.html.

_____ _____

Lead Advisor's Signature Date

SkillsUSA
MICHIGAN

State Fall Leadership Conference Registration
November 12, 2008
Holiday Inn South, Lansing

School _____ Lead Advisor _____

This Form Must Be Typed!

Student Names (First and Last Name)

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

Advisors Name(s):

_____ _____

_____ _____

_____ _____