



2010 MAVTI AUTO THEFT CONFERENCE REGISTRATION FORM

NAME(s) _____

DEPT / CO _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ FAX _____

OF MAVTI MEMBERS ATTENDING (\$10 ea.) _____

OF NON-MEMBERS ATTENDING (\$30 ea.) _____

(the non-member cost includes membership into MAVTI. Please attach completed membership form found on website)

TOTAL AMOUNT DUE: _____

Complete the form online and print it. Then either fax or mail the completed form along with a check made payable to MAVTI to:

2010 MAVTI Auto Theft Conference
P.O. Box 24064
Lansing, MI 48909-4064
Fax (517) 241-0161

All attendees must register!

For questions regarding registration and billing please contact:
Ms. Newt Shoup tel. 517-241-1089

Please direct all other questions regarding the conference to:
Mr. Doug McCallister, tel. 989 666-0096

You can utilize one form for multiple attendees from the same department or company, but all attendees must be listed.