



**2011 MAVTI AUTO THEFT CONFERENCE
REGISTRATION FORM**

NAME(s) _____

DEPT / CO _____

MCOLES NUMBER _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ FAX _____

EMAIL FOR ALL ATTENDEES _____

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

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

TOTAL AMOUNT DUE: _____

Instructions:

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

2011 MAVTI Conference
P.O. Box 501
Dearborn, MI 48121

All attendees must register prior to September 10th!

For questions regarding registration and billing please contact:
Linda Wieckowski at 734-397-0090 or Wieckol@michigan.gov

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