

**Lab Practices Seminar**  
**Attendee Registration**  
**Tuesday, May 15<sup>th</sup>, 2018**  
**Lansing Community College (West)**  
5708 Cornerstone Drive, Lansing, MI 48917



**ATTENDEE INFORMATION:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_  
*(Registration confirmations are sent via email only)*

I want DW or WW CECs for attending this seminar      DW License # \_\_\_\_\_  
Meal Preference:     Regular     Other (please specify): \_\_\_\_\_

**REGISTRATION OPTIONS:** *(memberships are verified upon registration)*

MWEA / WEF / AWWA Member - **\$135**  
OR  
 Non-member - **\$205** *(Complimentary 1-year MWEA membership included)*

**PAYMENT OPTIONS:**

Bill Me      Purchase order (if applicable): \_\_\_\_\_  
 Check Enclosed \$ \_\_\_\_\_ (payable to MWEA)      Check #: \_\_\_\_\_  
 Charge \$ \_\_\_\_\_  
           Visa     MasterCard     AMEX     Discover

\_\_\_\_\_  
*Credit Card Billing Address*      *Account Number*  
\_\_\_\_\_  
*Credit Card City, State Zip Code*      *Expiration Date*

Credit Card Approval Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**For information about this seminar or to register online go to: [www.mi-wea.org](http://www.mi-wea.org)**

**Email this registration to [kusko@mi-wea.org](mailto:kusko@mi-wea.org), Fax to (517) 641-7388, or Mail to P.O. Box 397 Bath, MI 48808**

*MWEA Cancellation Policy:* If MWEA cancels, full refunds will be issued. If registrant cancels 7 days or more before program, a 100% refund will be issued. If cancellation is less than 7 days before program, no refund will be given. No refunds are made if cancellation is after program date. Registration can be transferred to another person in your organization at any time. All changes must be communicated to the MWEA office at 517-641-7377.