



HOMETOWN COMPETITIVENESS

A COME-BACK/GIVE-BACK APPROACH TO RURAL COMMUNITY BUILDING

HomeTown Competitiveness Workshop

Registration Form

Thursday, October 18, 2007
9:00 a.m. – 4:00 p.m.
Northern Michigan University
Bottum University Center
Marquette, Michigan

Mail or fax this in to:

Karen Wolf, Great Lakes Center for Youth Development
307 S. Front Street, Marquette, MI 49855
FAX #906-228-7712, e-mail: kwolf@glcyd.org

Personal Information:

Title:	First Name:	Last Name:	
Organization:		Job Title:	
Address:			
City:		State:	Zip Code:
Phone Number:		Email Address:	
Additional Attendees From Same Organization			
First Name:	Last Name:		Job Title:

Payment Information:

Method of Payment		
<input type="checkbox"/> Credit Card <input type="checkbox"/> Check (enclosed) Payable to: Great Lakes Center for Youth Development <input type="checkbox"/> Bill My Organization		
Payment Options: <input type="checkbox"/> \$49.00 GLCYD Member <input type="checkbox"/> \$59.00 Non-Member		
Credit Card information <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	Account Number:	Expiration Date:
Name as it appears on credit card:		
Are you a GLCYD member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Would you like to become GLCYD Member and save on this registration fee? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you applying for a GLCYD workshop scholarship? <input type="checkbox"/> Yes <input type="checkbox"/> No
Total Payment		
Total Payment \$ _____		

You may make copies of this form for additional members of your staff or other organizations.