Annual Meeting & Conference Registration Form

Full Name	Badge Name	
Spouse/Guest Full Name (Only if attending events)	Badge Name	
Company or Firm Name		
Company Address		
City State	Zip Fax	
Email Address (must provide to receive confirmation)		
Office Phone Number	Personal Phone Number	
Emergency Contact	Phone Number	
Is this your first time attending? ☐ Yes ☐ No *Dress code is Business Casual	Special diet requests?	
Registration fees include entrance for one person to at All other act	tend Educational Sessions and Judi	cial/Vendor Reception.
■ * MDTC Member* * Non -members who register at this rate will be invoiced the difference be		\$
■ Associate Member • Paralegals/Non-Attorney Professionals	\$100.00	\$
☐ Non-Member	\$400.00	\$
☐ Group (3 or more attendees from your firm) # of persons Rate per attendee. Includes one year membership for Non-Member attended.	x \$200.00	\$
New Member SPECIAL cost of meeting & 1 year of members *If registering as a new member with attendance, you must complete and		return it with your registration form.
☐ 5 years or more in practice	\$425.00	\$
☐ Less than 5 years in practice	\$225.00	\$
	Total:	\$

Return completed form with check made payable to: MDTC PO Box 66, Grand Ledge, MI 48837 Phone: 517-627-3745 / Fax: 517-627-3950

IF you would like to pay online, please visit – https://mdtcannualmeeting2023.eventbrite.com

Room Reservations:
Treetops Resort
3962 Wilkinson Road, Gaylord, MI 49735
(855) 261-8764
Ask for Michigan Defense Trial Counsel group rates.
Inn Standard Room \$119.00 – Lodge Queen Deluxe Room \$174.00
Room Deadline: 4-30-2023