



MAHA UPD SPRING MEETING

**Wednesday, May 9, 2018
Zion Lutheran Church
435 Oak Street Manistique, MI 49854**

**8:30 AM EDT
REGISTRATION FORM**

DEADLINE FOR REGISTRATION April 30, 2018

HOSPITAL NAME: _____

MEMBER'S NAME

MEMBER'S TITLE

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Registration fee of \$20 per person includes full continental breakfast and lunch.

PLEASE INDICATE ANY SPECIAL DIETARY NEEDS.

Number or attendees _____ total amount \$ _____

Make check out to: SMH Auxiliary

Please send fee to:

**Joanne Nelson
900 Steuben Street Apt. 108
Manistique, MI 49854**