

AIAG 35th Anniversary Membership Appreciation Party

REGISTRATION FORM

Friday, May 5, 2017 Royal Oak Music Theater, 318 W. Fourth Street, Royal Oak, MI
5:30pm- 9:00pm

Member Name: _____

Guest Name: _____

Company: _____

Company Address: _____

Member Email: _____

Member Phone Number : _____

Payment Information*:

_____ **Total (~~\$25 per person~~) 2 for one - \$25 per couple**

Check enclosed (made payable to AIAG) Mail checks to: AIAG Attn: Shannon Osburn,
26200 Lahser Rd, Suite 200
Southfield, MI 48033

Visa, MasterCard and American Express Payments: For your safety, we ask that you do not provide your credit card details on this form; instead, please provide us with a contact name and phone number to call for credit card information to complete payment.

Contact Name: _____

Email: _____

Phone Number: _____

* Receipts for charitable contribution will be sent out after the event to the email provided above.

**Submit completed form to AIAG Event Coordinator: Shannon Osburn at
sosburn@aiag.org or via fax at (248) 784-1896.**



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