

Local President's Designee Selection Form

Name of Local: _____

Name of Local President: _____
(PRINT Clearly)

This is to certify that I have selected the following person from my local as my designee for the 2017 Summer Leadership Conference to be held at Lake Superior State University, August 1-3, 2017.

Name of Designee: _____
(PRINT Clearly)

Designee's Address: _____

(City, State, Zip)

Date: _____

President's Signature: _____

IMPORTANT NOTE: Designees will NOT be registered until this form is received.
Failure to submit this form will result in a delay of the registration and could affect session availability.

Return this completed form with the designee's registration form to:

Lisa Andros, MEA-Retired
Michigan Education Association
1216 Kendale Blvd., PO Box 2573
East Lansing, MI 48826-2573