



## 2021 MVCI Registration Form

Rank/Title: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Department: \_\_\_\_\_

Department \_\_\_\_\_

Address: \_\_\_\_\_ Department Phone #: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Supervisor Mobile #: \_\_\_\_\_

Number of Officers Registering: \_\_\_\_\_ Name(s) of Officers: \_\_\_\_\_

Staying at Host Hotel: \_\_\_\_\_ Attending Banquet: \_\_\_\_\_

**Email the completed registration form to [admin@mvci.org](mailto:admin@mvci.org).**

Please make payment to Annual MVCI and mail to 10442 S. Cork Street, Morrice, MI 48857

*Registration will be confirmed once payment has been received.*