

REGISTRATION FORM

**TRI-STATE ACADEMY OF LEGAL STUDIES IN BUSINESS
2007 ANNUAL MEETING
NOVEMBER 9-10, 2007
EAST LANSING, MICHIGAN**

WHERE:

Kellogg Hotel & Conference Center
Michigan State University
East Lansing, Michigan
Telephone: 517-432-4000
Fax: 517-353-1872
Booking Reference: Tri-State Academy

CONTACT: Joseph J. Galante

Department of Business Administration
McComsey Hall, Room 341
Millersville University of Pennsylvania
P.O. Box 1002
Millersville, PA 17551-0302

Telephone: 717-872-3839
Email: joseph.galante@millersville.edu

_____ **YES! I plan on attending the 2007 Annual Meeting**

Name: _____

Institution: _____

Address: _____

_____ Email: _____ Telephone #: _____

Conference Fees: (check all that apply)

- _____ \$ 5.00 2007 Tri-State Membership Dues
- _____ \$35.00 Proceedings (if unable to attend conference)
- _____ \$125.00 Early Registration Fee (if received by October 12, 2007)
- _____ \$150.00 Regular Registration Fee (if received by October 26, 2007)
- _____ \$175.00 Late Registration Fee (received after October 26, 2007)

REGISTRATION INCLUDES *Proceedings*, Academic Sessions, Friday evening dinner reception, and refreshments.) NOTE: Dues are separate.

- _____ \$75.00 *Registration Fee for First Time Participants*
- _____ \$50.00 Friday evening dinner reception and activities charge per guest.

**TOTAL ENCLOSED \$_____ (Make check(s) payable to Tri-State ALSB.) (No credit cards please.)
Send check and registration/participation form to Joseph J. Galante at the address listed on the participation form.**

**TRI-STATE
PARTICIPATION FORM
Annual Meeting, November 9-10, 2007
East Lansing, Michigan**

Name: _____

I would like to present a paper. Paper topic: _____

Paper Title: _____

(Please attach a 100 word abstract and list the names of all co-authors and their institutions.)
You must send the title, name(s) of author(s), and abstract to:
Joseph J. Galante by October 5, 2007.

Preferred time for presentation (please note **first and second choices**)

_____ Friday, 1:30 p.m.	_____ Saturday, 9:00 a.m.
_____ Friday, 3:00 p.m.	_____ Saturday, 10:45 a.m.
	_____ No preference

_____ I am willing to serve as a session moderator. My preferred times are:

_____ Friday, 1:30 p.m.	_____ Saturday, 9:00 a.m.
_____ Friday, 3:00 p.m.	_____ Saturday, 10:45 a.m.
	_____ No preference

Distinguished Service Award – I would like to nominate _____
for the following reasons:

***Please return this form along with the Registration Form and check(s) to:**

Joseph J. Galante
Tri-State Registration
Department of Business Administration
Millersville University
McComsey Hall, Room 341
P.O. Box 1002
Millersville, PA 17551-0302