

WOMEN LAWYERS ASSOCIATION OF MICHIGAN

91ST ANNUAL MEETING

MAY 7, 2009 • 11:00 A.M. – 1:00 P.M.

LEADERSHIP TRAINING 1:30 P.M. – 4:30 P.M.

FOX HILLS GOLF & BANQUET CENTER PLYMOUTH, MI



KEYNOTE SPEAKER:

THE HON. DIANE HATHAWAY, MICHIGAN SUPREME COURT

CELEBRATING WOMEN LEADERS

UPDATES FROM: Jennifer B. Salvatore, Partner, Nacht & Associates, P. C.,
Lilly Ledbetter Fair Pay Act signed into law Jan. 29, 2009 and its impact on women.

Sandy Soifer, Executive Director, Women's Historical Center and Hall of Fame, Lansing, MI
Michigan Women's Hall of Fame, Michigan Women Firsts and Founders.

LEADERSHIP TRAINING:

FACILITATED BY SUSAN STRATTON-RADWAN, CAE, MED

- Mission & Values of Women Lawyers
- Strengthening Our Relationships
 - State & Regions
 - Boards & Committees
 - Leadership & Members
- Defining Key Goals
- Defining Success Measurements

REGISTRATION INFORMATION:

*Lunch Included with Registration

| <u>ANNUAL MEETING:</u> | <i>On or Before April 27th</i> | <i>After April 27th</i> | |
|------------------------|------------------------------------|-------------------------------|--------------|
| Member | <input type="checkbox"/> \$60 | <input type="checkbox"/> \$65 | Total: _____ |
| Non-Member | <input type="checkbox"/> \$70 | <input type="checkbox"/> \$75 | Total: _____ |

| <u>LEADERSHIP TRAINING:</u> | <i>On or Before April 27th</i> | <i>After April 27th</i> | |
|------------------------------------|------------------------------------|-------------------------------|--------------|
| WLAM Member - Regional/State Board | <input type="checkbox"/> FREE | <input type="checkbox"/> FREE | Total: _____ |
| WLAM Member | <input type="checkbox"/> \$40 | <input type="checkbox"/> \$50 | Total: _____ |

Grand Total: _____

Send your registration and check to: WLAM, 3300 Washtenaw Ave. Ste. 220, Ann Arbor, MI 48104.

Credit card payments may be sent via fax to: 734-677-2407.

Questions? Contact WLAM by phone: 734-973-7600 or email: alecia@ucia2.com

Website: womenlawyers.org

CONTACT INFORMATION:

Name: _____ *Check here to request vegetarian option:*

Address: _____

Phone: _____ E-mail: _____

PAYMENT INFORMATION:

Visa MC Cash Check (Make checks payable to: *Women Lawyers Association of Michigan*)

Credit Card #: _____ CVV Code: _____ Exp. Date: _____
(3 or 4-digit code on back of card)

Print Name on Card: _____ Signature: _____

Billing Address/City/State/Zip: _____

Email (*to confirm receipt*): _____