



MALSCE Proprietors' Council Meeting

Open to All MALSCE Members

Friday, November 8, 2023

1:00 PM – 3:00 PM

Aldrich Center at TEC, One Walnut Street, Boston, MA 02108

Moderator:

Michael A. Clifford, PLS

Co-founder and Principal, DGT Associates and MALSCE Proprietors' Council Chair

Join MALSCE Proprietors' Council Chair Mike Clifford for the second of four Proprietors' Council luncheon meetings planned for the current fiscal year. Continuing to discuss business issues and MALCE undertakings, agenda items for this meeting include:

- Pulse of business
- Industry trends regarding sources of new work
- MALSCE President's update
- 2024 Convention curriculum and proprietors' council roundtable discussion
- New business

Registration Deadline: Wednesday, November 6, 2023

Registration Information: *Advanced registration for the meeting is required and in-person attendance is limited to 16 with registrations accepted on a first-come, first-served basis.* Proprietors' Council members can register to attend this meeting for free [here](#). All other MALSCE members can click here to register for a nominal fee. MALSCE members registering online to attend this meeting should login using their MALSCE assigned username and password. If you do not know your member login information, call 617/227-5551. You can also register by completing the form below and following the submission instructions.

Registration Form **MALSCE Proprietors' Council Meeting, Friday, November 8, 2023**

Registration Fee Proprietors' Council members: Free In-Person
Other MALSCE members: \$25 In-Person

Registrant Information

Name: _____
Organization (if applicable): _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____ Email: _____
Dietary Restrictions: _____

Total Amount Enclosed \$ _____

Mail your registration form and check (payable to "MALSCE") to: MALSCE, One Walnut Street, Boston, MA 02108-3616. Fax or email your registration form with credit card information to 617/227-6783 or malsce@engineers.org, respectively.

Or Pay with (Check one): Visa Master Card American Express

Name on Card: _____ Expiration Date: _____
Card Number: _____ Security Code: _____
Billing Address: _____
City: _____ State: _____ Zip Code: _____
Signature: _____

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