

**WESTERN WORKFORCE INVESTMENT ACT (WIA)
REGIONAL CONFERENCE- INDIAN AND NATIVE AMERICAN
PROGRAMS**

Bahia Resort Hotel ♦ San Diego, California - January 22–26, 2007

“Our History – Our Future”

CONFERENCE REGISTRATION FORM

(please type or print clearly)

Grantee Name: _____

Address: _____

City/State/Postal Code: _____

1 - Name: _____

Title: _____

2 - Name: _____

Title: _____

3- Name: _____

Title: _____

Special Needs (Check here if you wish to be contacted)

Do you have any special needs and/or dietary restrictions that we can address to make your participation more enjoyable: _____

Pre-Registration - \$225.00 before December 22nd **On-Site Registration** - \$300.00 after December 22nd

(All registration fees are non-refundable)

Payment - Enclosed payment is for a total of _____ individuals at \$ _____ = \$ _____

METHOD OF PAYMENT

Check or money order Payable to: **Phoenix Indian Center – NWS**

Mail to: **California Indian Manpower Consortium, Inc.**

738 North Market Boulevard ♦ Sacramento, CA 95834

916-920-0285 telephone/916-641-6338 fax

Credit Card (Visa/MasterCard Only)

Card No. _____ Expiration Date: _____

Cardholder Name: _____

Cardholder Address/Zip Code: _____

Signature: _____