

# 2008 WESTERN MULTI-REGIONAL CONFERENCE

The Davenport Hotel & Tower –  
Spokane, Washington  
February 25-29, 2008

## CONFERENCE REGISTRATION FORM

(Please type or print clearly)

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

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

City/State/Postal Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No. \_\_\_\_\_

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 January 18, 2008

**On-Site Registration** - \$300.00 after January 18, 2008

*(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: \_\_\_\_\_

CardholderName: \_\_\_\_\_

Cardholder Address/Zip

Code: \_\_\_\_\_

Signature: \_\_\_\_\_