REGISTRATION FORM

Course Title: **Program Standards and Statement of Work**

Course Date: July 10-12, 2001

Course Location: Turning Stone Casino Resort
5218 Patrick Road
Verona, New York

Please Print or Type

Name _____ Telephone _____

Title _____ Fax # _____

Tribe / Organization _____

Email Address _____

To register, complete this registration form and fax to the attention of Starr Penland, at (703) 235-8610 by June 25, 2001.
First come, first serve basis.

Questions: Office telephone number: (703) 235-3077