

2023 Registration Form

12TH Tribal Land Staff National Conference

March 21-23, 2023 ♦ Pechanga Resort Casino ♦ Southern California



Please complete this form to register one person for the conference.

To register additional people from your organization, please use the form on page 2.

Name _____ Title/Department _____

Tribe/Organization _____

Address _____

City/State/Zip _____

Work Phone _____ Fax _____ Cell _____

Email Address _____

I hereby authorize the National Tribal Land Association (NTLA) and Indian Land Tenure Foundation (ILTF) to use my name and contact information in a conference participant list to be shared with conference attendees ONLY. The list will include name, job title, organization and email address. Check the box if you DO NOT want your name and contact information included on this list. Do not include my information on the 2023 participant list.

Tribal Land Staff National Conference -- March 21-23, 2023

Early Registration Fee through Feb. 15 (per person) \$500

Regular Registration Fee after Feb. 16 (per person) \$600

Total Number of Registrants _____

Total \$

PAYMENT INFORMATION: All registrations must be accompanied with payment in full. *Scholarships are not available.*

CHECK ENCLOSED (payable to Indian Land Tenure Foundation). Mail registration form and check payment to:
NTLA c/o Indian Land Tenure Foundation, 151 County Road B2 East, Little Canada, MN 55117

INVOICE: (check this box if you would like to receive an invoice via email)
Please send this completed form to ntla@iltf.org. An invoice will be emailed to you within one business day.

If you would like to pay by credit card please visit the online registration form on the website located here: <https://www.ntla.info/conference/>

Cancellation and Refund Policy: Request for cancellation must be in writing to ILTF and received by March 1, 2023.

Co-hosted by:



www.ntla.info



www.iltf.org

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Additional Registrants:

Add all additional registrants to the list below.

Name _____ Title/Department _____

Email _____ Phone _____

Address _____

City/State/Zip _____

Name _____ Title/Department _____

Email _____ Phone _____

Address _____

City/State/Zip _____

Name _____ Title/Department _____

Email _____ Phone _____

Address _____

City/State/Zip _____

Name _____ Title/Department _____

Email _____ Phone _____

Address _____

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