

◆◆◆◆ **2024 WESTERN REGIONAL WIOA/477 TRAINING** ◆◆◆◆

November 4-8, 2024

Muckleshoot Casino Resort
2402 Auburn Way S | Auburn, WA 98002

REGISTRATION FORM

Registration Fee & Payment

Registration Fee Schedule

\$275.00----- Early Bird Registration. Form **and**
Payment must be received/postmarked by
August 30, 2024 to receive this rate.

\$400.00-----**Registrations received after August 30, 2024 including On-site registration**
(All registration fees are non-refundable)
Early registration helps with planning activities & meals **AND** saves you money!

Payments:

Payments can be made using a credit card Online at
<https://2024WIOA.givesmart.com>

OR by sending Company Check or Money Order payable to the
Phoenix Indian Center, Inc./Western Regional WIOA/477 Training. Call or email to request an IRS W-9.

Mail FULL Payment BY CHECK/MONEY ORDER to:

Phoenix Indian Center, Inc.
Western Regional WIOA/477 Training
4041 N. Central Avenue, Building B
Phoenix, AZ 85012 **FAX: 602-237-6953**
***EMAIL OR FAX THIS FORM TODAY. MAKE A COPY AND SEND WITH YOUR CHECK.** Email to bmarsall@phxindcenter.org

Hotel Accommodations:

Host hotel is Muckleshoot Casino Resort, register asap. Please check for availability of the single/double. Rate is \$176.00 (plus room tax). **Group Name:** "Western Regional WIOA 166/477 Training."
YOU may call hotel at 1.800.804.4944 or visit our website for the online booking link.

Reserve your room by 10/25/2024

(Please type or print clearly. **Use one form per registrant.**)

Grantee Name: _____

Mr. Ms. Other _____

First: _____

Last: _____

Title/Position: _____

Address: _____

City: _____

State: _____ Postal Code: _____

Telephone: _____

Fax Number: _____

Email: _____

Payment Total: \$ _____

Check enclosed – make payable to: **PHOENIX INDIAN CENTER, INC.**

Purchase Order # _____

For further information, please contact the Phoenix Indian Center, 602-264-6768. Ask for Bree Marshall.

Send your form and payment in NOW
(1) Scan and email completed form to bmarsall@phxindcenter.org OR
(2) Fax completed form to Bree at 602-237-6953

Signature: _____

This form and payment CONFIRMS ATTENDANCE for the individual listed on this form.