



National Indian Gaming Commission Phoenix Region Training

Background & Licensing Training Phoenix Region Office November 7, 2012

Training Registration Form

Tribe Information

****All fields are required****

Tribe Name

Entity registrant represents

If you **do not** represent a tribe/tribal casino/tribal gaming commission entity, please enter agency name below.

Attendee Information

Name

Position/Title

Business Street address

City/State/Zip

Business contact phone number

**include area code - numbers only please*

Ext.

Business E-mail address

For further information or questions, please contact:

Emily Molina

Administrative Assistant

Phone: (602) 640-2951

Must print before submitting registration. **Please Note: your registration is not submitted until you press the "Submit Registration" button.**

Please use this button to **submit via E-mail to NIGC** (Outlook or Internet based e-mail applications)

****Please Note: The e-mail will automatically be addressed to appropriate NIGC personnel, please do not make any changes.****
Thank you!

NOTE: Please use a separate form for each attendee/registrant