



# Workshop Registration Form

NATIONAL INDIAN COUNCIL ON AGING  
2014 BIENNIAL CONFERENCE, SEPTEMBER 3-6, 2014  
SHERATON PHOENIX DOWNTOWN, PHOENIX, AZ

**EXTENDED  
DEADLINE  
JUNE 30, 2014**

(Check all boxes that apply)    Presenter     Sponsor     \*NICOA member:

**\*All Members and Mountain / Eagle Sponsors are given Complimentary Presentation space for a Workshop Presentation**

1) Name/Title of Presenter (Primary Contact): \_\_\_\_\_  
2) Name/Title of Presenter: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Organization/Tribal Organization: \_\_\_\_\_ Email: \_\_\_\_\_

Presenter Type	Number of Workshop Sessions	Fees Due
Presenter All NICOA Registered Dues Paying Members (1 complimentary workshop)	\$0 (limited to 2 presenters per workshop)	
Sponsor – Mountain level (3 complimentary workshops)	\$0 (limited to 2 presenters per workshop)	
Sponsor – Eagle level (2 complimentary workshops)	\$0 limited to 2 presenters per workshop)	
All other sponsors & non-members	\$200 each presenter (limited to 2 presenters per workshop)	
Additional Sessions – Please Complete a separate form for each additional session	\$100 each additional session (limited to 2 presenters per workshop) Circle number of additional sessions 1 2 3 4    [\$100 x ____ =]	

**Two Sessions are available on Wednesday, and Thursday; One Session on Friday**

Put an X in each box to indicate Session Choice	Wed, Sept. 3	Thurs., Sept. 4	Fri, Sept. 5	Total Fee Enclosed	\$
1st Session 2:30-3:20 PM					
2nd Session 3:30-4:30 PM					

Because NICOA conferences are produced at cost, presenters are responsible for their own travel, accommodations, applicable membership dues, registration fees and additional workshop fee if applicable (*per person*), which would provide entrance at no cost to all of the events and meals offered at the conference.

**TITLE OF PRESENTATION:** \_\_\_\_\_

**\*Survey and Focus Group sessions must be approved by the Executive Director prior to registering – send request to information contact below.**

**PLEASE ATTACH THE FOLLOWING TO THIS APPLICATION:**

Complete Registration Form(s) and Pay applicable Fee plus \$100 for each additional session and Credit Card form if using a Credit Card.

A brief description of your proposed presentation (no more than 150 words each); A brief biography (no more than 150 words) before **deadline of June 30, 2014**.

Please indicate if you will have handouts [ ] YES [ ] NO Each presenter will be responsible for individual materials. For planning purposes, each presenter should be prepared to bring a minimum of 250 copies of handout materials per session. **Registration is limited to two (2) presenters only. EQUIPMENT PROVIDED: LCD Projector, screen, laptop, and microphone.** Each presenter will be responsible for providing any additional equipment you require. If you are selected as a presenter, and need additional equipment, NICOA will provide you with contact information for the audio visual contractor; you will be responsible for any additional cost. We will also provide detailed information on the workshop sessions and numbers.

**Workshop Tracks** (Please select track(s))

**Health / Wellness:** Health Insurance, Heart Disease / Hypertension, Diabetes, Caregiver Support, Medicare/Medicaid, Access to Health Care, Hearing / Vision Care, Exercise & Fitness, Medications Management, Other \_\_\_\_\_

**Community Services:** Nutrition, Transportation, Falls Prevention, Long Term Care, Elder Abuse Program, Legal Support, Title VI Grantee Services, Title III State Services, Other \_\_\_\_\_

**Economic Well Being:** Social Security, Employment & Training (SCSEP), Retirement Planning, Financial Management, Housing, Other \_\_\_\_\_

**Policy / Advocacy:** Older Americans Act, Administration on Aging & Community Living, Affordable Care Act, Indian Health Services, Veterans Administration, Medicare/Medicaid Policy, How to Advocate, Other \_\_\_\_\_

**ONLY REGISTERED attendees CAN ATTEND the Cultural Dinner, Honoring Luncheon, and Spiritual Breakfast, due to limited seating**

**MAIL / FAX / EMAIL ALL FORMS AND PAYMENT TO:**

National Indian Council on Aging, Inc.  
Attn: 2014 NICOA Conference  
10501 Montgomery Blvd. NE, Suite 210  
Albuquerque, NM 87111

**FOR INFORMATION CONTACT:**

Randella Bluehouse, Executive Director  
Phone: (505) 292-2001  
Fax: (505) 292-1922  
Email: info@nicoa.org  
NICOA's Federal ID Number: 86-0321646

# WORKSHOP REGISTRATION FORM