



GROUP PRE-REGISTRATION FORM (For use with group payments) :

Organization: _____
 Contact Name: _____ E-mail: _____
 Address: _____ City/Town: _____
 Province: _____ Postal Code: _____ Tel: _____

PRICING:

Early Bird (Payment must be received by January 15, 2018):

| | | | |
|--|-----------------|-------------------------|-----------------|
| Chief..... | \$300.00 | Other Governments | \$450.00 |
| First Nation Citizen Early Bird | \$300.00 | | |
| Observer and Non-Government Organization | \$450.00 | | |

After January 15, 2018:

| | | | |
|--|-----------------|--|----------------------|
| Chief..... | \$400.00 | Student (valid student card required) | \$100.00 |
| First Nation Citizen | \$400.00 | Elder..... | Complimentary |
| Observer & Non-Government Organization | \$550.00 | Veteran..... | Complimentary |
| Other Governments | \$550.00 | Accredited Media | Complimentary |
| Senior Citizens (age 65 and older)..... | \$100.00 | | |

FEES:

Early Bird (Payment must be received by January 15, 2018):

\$300.00 x = \$ _____ **\$450.00** x = \$ _____

After January 15, 2018:

\$400.00 x = \$ _____
\$550.00 x = \$ _____
\$100.00 x = \$ _____

➡ TOTAL FEES: \$

METHOD OF PAYMENT (please select one) :

Organization Cheque (Enclosed)
 Money Order/ Certified Cheque (Enclosed)
 VISA
 Master Card
 Amex
 \$ _____ \$ _____

Card Number: _____ Expiry (MM/YY): _____ / _____ CVC (3-digit back of card): _____
 Card Holder's Signature: _____ Authorized Amount: \$ _____
 Print Name: _____ E-mail for Receipt: _____

GST # 133649848 RT 0001

Please make cheque payable to the National Indian Brotherhood. Fax or mail forms to Tash Cote by February 6th, 2019. After this date, please bring payment on site. Fax to: 613-241-5808 Mail: 55 Metcalfe Street, Suite 1600, Ottawa, ON K1P 6L5. Please note registration fees are non-refundable after February 6th, 2019. An administration fee of \$50.00 will apply for all cancellations.



ATTENDING PARTICIPANTS:

| PARTICIPANT 1 | Name of Delegate | Organization | Province | Email | Registration Type <i>FN Citizen; Observer/NGO; Other Gov't; Seniors (65 and older); Student with ID; Elder</i> |
|---------------|---|--------------|----------|-------|---|
| | <p>Please indicate if you will be attending the pre-conference day on Treaty Education February 12, 2019: Yes, I will be attending: <input type="radio"/> No, I will not be attending: <input type="radio"/></p> <p>Please indicate if you are: Director of Education: <input type="radio"/> Principal: <input type="radio"/> Teacher: <input type="radio"/> Administrator: <input type="radio"/> Government: <input type="radio"/> Other: <input type="radio"/></p> <p>Do you have any dietary restrictions: _____</p> <p>I do not provide consent for my photo and/or video to be taken during the 2019 Directors forum: <input type="radio"/> <i>(Photo's and/or video will be taken at the First Nations Directors of Education National Forum for AFN use, if you do not consent it is your responsibility to inform the photographer)</i></p> <p>I do not provide consent for AFN to use my email as part of their education mailing list: <input type="radio"/></p> | | | | |
| PARTICIPANT 2 | Name of Delegate | Organization | Province | Email | Registration Type <i>FN Citizen; Observer/NGO; Other Gov't; Seniors (65 and older); Student with ID; Elder</i> |
| | <p>Please indicate if you will be attending the pre-conference day on Treaty Education February 12, 2019: Yes, I will be attending: <input type="radio"/> No, I will not be attending: <input type="radio"/></p> <p>Please indicate if you are: Director of Education: <input type="radio"/> Principal: <input type="radio"/> Teacher: <input type="radio"/> Administrator: <input type="radio"/> Government: <input type="radio"/> Other: <input type="radio"/></p> <p>Do you have any dietary restrictions: _____</p> <p>I do not provide consent for my photo and/or video to be taken during the 2019 Directors forum: <input type="radio"/> <i>(Photo's and/or video will be taken at the First Nations Directors of Education National Forum for AFN use, if you do not consent it is your responsibility to inform the photographer)</i></p> <p>I do not provide consent for AFN to use my email as part of their education mailing list: <input type="radio"/></p> | | | | |
| PARTICIPANT 3 | Name of Delegate | Organization | Province | Email | Registration Type <i>FN Citizen; Observer/NGO; Other Gov't; Seniors (65 and older); Student with ID; Elder</i> |
| | <p>Please indicate if you will be attending the pre-conference day on Treaty Education February 12, 2019: Yes, I will be attending: <input type="radio"/> No, I will not be attending: <input type="radio"/></p> <p>Please indicate if you are: Director of Education: <input type="radio"/> Principal: <input type="radio"/> Teacher: <input type="radio"/> Administrator: <input type="radio"/> Government: <input type="radio"/> Other: <input type="radio"/></p> <p>Do you have any dietary restrictions: _____</p> <p>I do not provide consent for my photo and/or video to be taken during the 2019 Directors forum: <input type="radio"/> <i>(Photo's and/or video will be taken at the First Nations Directors of Education National Forum for AFN use, if you do not consent it is your responsibility to inform the photographer)</i></p> <p>I do not provide consent for AFN to use my email as part of their education mailing list: <input type="radio"/></p> | | | | |