

**Tribal, State and Federal Summit:
Protecting & Investing in Tomorrows Leaders
May 3-4, 2017**

Wildhorse Resort and Casino
Pendleton, Oregon

Name: _____

Title: _____

Organization: _____

Tribal Affiliation: _____

Agency you represent:

- Tribe Non-Profit State Federal Student*
 Tribal Member Community Member School Staff
 Child of adult above; Name _____ Age _____

(Some content may not be suitable for children under the age of 12. Please use discretion.)

*Accompanied by School Staff/Teacher: _____

Mailing Address: _____

City: _____ State: ____ Zip Code: _____

Phone: () _____

Email: _____

I will be attending:

- Pre-Conference and both Conference days
 Pre-Conference only May 2 Pre-conference Track
 Conference only May 3-4 **Law Enforcement/Advocate**
 Conference May 3 only **Medical/Behavioral Health**
 Conference May 4 only

DEADLINE FOR REGISTRATION IS April 24, 2017

To register, complete and return this form to:

Confederated Tribes of the
Umatilla Indian Reservation
Attn: Family Violence Services
46411 Timíne Way
Pendleton, OR 97801

Or Fax to:

541-429-7415

Or Email to:

desireecoyote@ctuir.org

**Tribal, State and Federal Summit:
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Vendor Information and Application

The vendors will be set up in the "fish" hallway. Chairs and tables set against the wall per fire code regulations. Maximum 6 vendors.

Exhibit space must be staffed during the times 8 am – 5 pm.

Vendor exhibits will be available for event.

Set up each day, May 2-4, 2017, at 7:30 am. Please dismantle on May 4 no later than 6 pm.

Fee for vendor table for this event is one product for conference door prize due on first day of set up. In no event shall Conference host nor WRC be liable for any damage to or loss of personal property sustained by you or your company. Any items left after the exhibit hall teardown is not the responsibility of Conference host nor WRC and will be discarded.

Application deadline: April 24, 2017 4:00 pm. You will be notified by April 28, 2017 if you have been selected as an exhibitor. Applications with signature should be returned to:
Desiree Coyote, Family Violence Services
46411 Timine Way, Pendleton, OR 97801
desireecoyote@ctuir.org or Fax 541-429-7415

Organization Name: _____

Name Contact/Staff for Table: _____

Address: _____

Phone: _____ E-mail: _____

I have read and understand Vendor Information listed above:

Signature

Date