

**American Indian Higher Education Consortium Conference  
MARCH 24-27, 2012, RAPID CITY, SOUTH DAKOTA**

**Registration Information**

**GENERAL CONFERENCE FEE**

- Preregistration: Staff/Others \$200
- NOTE: Registration must be postmarked by March 2, 2012
- Late Registration (postmarked after March 2, 2012) \$300
- On-site Registration \$300
- Daily Registration \$60
- **(Registration free for elders 65 and older)**
- Student Awards Banquet \$25

**STUDENT CONFERENCE FEES** (requires student identification)

- Preregistration: Students \$125
- NOTE: Registration must be postmarked by March 2, 2012
- Late Registration (postmarked after March 2, 2012) \$150
- Onsite Registration \$150
- Daily Registration \$50
- Student Awards Banquet \$20

**COLLEGE REGISTRATION** (please type or print clearly)

Organization/Campus \_\_\_\_\_

Coordinator's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Note: Please list all students from your campus who are participating on the next page. Indicate whether registration is a general registration or a student registration and include fee amount on the line provided.

**Participants** (please type or print clearly)

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

Name \_\_\_\_\_ Student \$ \_\_\_\_\_ General \$ \_\_\_\_\_

**TOTAL** Student \_\_\_\_\_ GENERAL \_\_\_\_\_

**Method of Payment:**

Business Check \_\_\_ Money Order \_\_\_ Personal Check \_\_\_ Credit Card \_\_\_ Amount enclosed:  
\_\_\_\_\_

**Payable to: Oglala Lakota College – AIHEC**

Coordinator's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Mail completed registration forms and payment to:**

Jonnie Clifford – AIHEC Coordinator  
Oglala Lakota College  
P.O. Box 490, Piya Wiconi Rd.  
Kyle, South Dakota 57752

**(Registration is transferable, but non-refundable)**