34th Annual National Institute on Social Work and Human Services in Rural Areas

Diverse Populations: Challenges for Rural Social Work in the 21st Century

July 26-28, 2009

Holiday Inn Hotel and Suites ~ Downtown Waterfront ~ Duluth, Minnesota

First Name (As it will appear on Name Badge):_____

Last Name:_____

Employer/Affiliation:_____

Address:_____

City:_____ State:_____ Zip code:_____

Phone:_____ Cell Phone:_____

E-mail:_____ Fax:_____

Conference Fees:

(Note: Early Bird Registrations MUST be postmarked **on or before 5 pm on June 1, 2009**.)
(Deadline for cancellation with full refund is July 15, 2009.)

Conference Participants	Postmarked after June 1	Total
Full Conference Registration (Monday & Tuesday: July 27-28) (Includes Luncheon: Monday, July 27) (Does not include Pre-Conference event: Sunday, July 26)	$ 225	_____
Student Rate (Includes Luncheon: Monday, July 27) (Does not include Pre-Conference event: Sunday, July 26)	$ 100	_____

Pre-Conference Event: Sunday, July 26 – 6:00-8:30 pm
Vista Queen Cruise on Lake Superior with Admiral's Pizza Dinner
THIS PRE-CONFERENCE EVENT IS FULL. If you want to be added to a waiting list, please **e-mail: hsmithst@d.umn.edu**

One Conference T-shirt is included with paid Registration ~ **Please check size**:
Size: □ M □ L □ XL □ XXL

Additional T-shirts are available for $15 each ~ **please check size(s):**
Size: □ M □ L □ XL □ XXL _____x $15 _____

Total: **$_____**

Payment Method

_____Check/Agency Check/Money Order ~ Payable to: UMD
_____Credit Card: ___Visa ___MasterCard ___Discover/Novus (American Express is NOT accepted.)
Credit Card #_____Exp_____/_____ (Month/Year) IVC#_____
**If cardholder is different from registrant, include address and phone # below:

_____

Mail or Fax Payment and Registration Form to:

University of Minnesota Duluth ~ Continuing Education
Attn: Registration
1049 University Drive
104 Darland Administration Bldg.
Duluth, MN 55812-3011

FAX#: 218-726-6925
Contact: 218-726-8113 ~or~ hsmithst@d.umn.edu

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