



REGISTRATION FORM
Latino Legislative Forum on Health Disparities
Las Vegas, Nevada
December 7-9, 2007

ALL INFORMATION REQUIRED IN ORDER TO PARTICIPATE

Today's Date:

Last Name:

First Name:

MI:

Title:

Elected Appointed

Gender (circle one):

Party Affiliation (circle one):

Male / Female

Democrat/ Republican/Green Party/ Other _____

CITY/DISTRICT INFORMATION

City/District:

City/District Address:

City:

State:

Zip Code:

Phone:

Fax:

City/District Web site Address:

City/District E-mail Address:

Staff Contact:

Staff Title:

Council/Legislative Schedule:

City/District Profile:

Rural

Urban

Suburban

Constituent Population Size:

Percent Latino:

PERSONAL CONTACT INFORMATION

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Fax:

Personal E-Mail Address:

Please indicate which address we should use for future mailings:

District

Personal

MEMBERSHIP INFORMATION

Are you a current NALEO Member?

Yes

No

Please FAX or MAIL by October 26, 2007 to:
Elisa M. Sequeira - NALEO Educational Fund
(213) 747-7606 ext. 129 - (213) 747-7673 fax

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PLEASE SEE ADDITIONAL INFORMATION ON REVERSE

FEEES ASSOCIATED WITH INSTITUTE:

Current NALEO members

- Free for NALEO members whose State can not cover the cost
- \$100 if Membership is received by **October 26, 2007**
- \$150 late registration (includes late registration and NALEO membership)

Non-NALEO members

- \$300 for non-NALEO members
- Note: Estimated Registration costs of Institutes: \$400 (includes travel and lodging)

**Please FAX or Mail
by Friday, October 26, 2007 to:
NALEO Educational Fund
Attn: Elisa M. Sequeira
1122 W. Washington Blvd., 3rd Floor
Los Angeles, California 90015
(213) 747-7606 ext. 129 — (213) 747-7673 Fax**