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| **Basic Epidemiology Workshops**  **DATE & TIME**  **April 1-2, 2015**  **8:30am – 4:30pm** | |
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| **REGISTRATION INFORMATION:** | |
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| **NAME:** |  |
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| **TRIBE/ORG:** |  |
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| **JOB TITLE:** |  |
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| **ADDRESS:** |  |
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| **PHONE:** |  |
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| |  |  | | --- | --- | | **REIMBURSEMENT INFORMATION** | | | I will be traveling **more than 50 miles to attend** the meeting(s), and I am requesting reimbursement for the following. (CHECK ALL THAT APPLY): | | | **☐** Mileage (personal vehicles only)  **☐** Lodging\* ($141/night federal rate) | **☐** Per diem\*\* (federal rate)  **☐** Airfare (Nevada and Utah only) |   **Participants seeking a travel reimbursement must attend the full two days to be eligible for a reimbursement.**  \*Lodging and per diem rates based on U.S. GSA federal rates listed for March 2015.  \*\*Eligible for tribal partners away from their offices for more than 12 hours. | |
| **REGISTRATION DEADLINE IS Monday, March 23, 2015** | |
| **Email, Fax, or Mail Registration to:**  ITCA Tribal Epidemiology Center  2214 N. Central Avenue  Phoenix, AZ 85004  Tel: 602-258-4822 ⬩ Fax: 602-258-4825 ⬩ Email: [TECInfo@itcaonline.com](mailto:TECInfo@itcaonline.com) | |