



Registration Form

FAX: (605)338-0259 OR Mail to: South Dakota Achieve
 Attn: Jen Sundem
 4100 S. Western Ave.
 Sioux Falls, SD 57105
 jennifer.sundem@achievesd.org

REGISTRATION DEADLINE: Friday, October 14, 2011

Name: _____

Title (if applicable): _____

Organization (if applicable): _____

Additional Registrants: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

TO BETTER FACILITATE THE GreenSTAR Symposium, PLEASE CHOOSE YOUR AFFILIATION:

Family of person with disability
 Person with disability
 Student
 Professional serving people with disabilities
 Professional - Other
 Other

PLEASE ENTER TICKET QUANTITY:

Number of Tickets	Price Per Ticket	Price Description
_____	\$50	Non-profit organizations, families, students and persons with a disability
_____	\$100	For-profit organizations
_____	Total cost	

PAYMENT OPTIONS:

Check
 Please make checks payable to **South Dakota Achieve** and mail to above address
 Write on Check Memo line: GreenSTAR Symposium

Credit Card
 Card #: _____ / _____ (Exp. Date) _____ (CSC Auth Code)
 Billing Address: _____ Telephone: _____
 _____ Signature _____ Date

Purchase Order
 Number: _____

Please Send Invoice
 Invoice will be sent to attendee's address listed above

Scholarship Requested