

INTRODUCTION TO COLLABORATIVE GOVERNANCE

Spring Workshop: June 7 - 11, 2010

Registration Form

Name: _____

Title: _____

Organization: _____

Work Address: _____

(City)_____
(State)_____
(Zip)_____
(Work Phone)

E-mail Address: _____

Program dates and tuition. Please mark your calendars now!**Dates:** June 7 - 11, 2010**Location:** Portland State University Business Accelerator**Tuition:** \$1300.00**Method of payment** *(Note: Travel, meals, and lodging are not included in this fee.)* Check is enclosed Please send me an invoice. Credit Card (circle one): Visa M/C _____
(Number) (Exp.)_____
(Invoice to / Cardholder name – if different from above) (Phone)_____
(Billing address / E-mail address – if different from above)**Please mail or fax to:**Executive Leadership Institute
Hatfield School of Government
PO Box 751
Portland, OR 97207-0751

Phone: 503-725-8261

Fax: 503-725- 5111

Email: eli@pdx.edu

*Registration and payment are due by **May 7, 2010**. Cancellations received 30 days prior to the first day of the workshop will receive a full refund. Cancellations received 15 days prior to the first day of the workshop will receive a 50% refund. If a participant finds it necessary to cancel after that date, the sponsoring agency is welcome to substitute an alternative participant.*

The course may be canceled if there are uncontrollable circumstances, including low enrollment or other events that are unforeseen.

If you have mobility, dietary, or other special needs, please contact ELI by May 31, 2010.