

Southern Plains Indian Housing Association  
 Quarterly Meeting  
 Pre-Registration Form

Please Print or Type

Meeting

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Organization: \_\_\_\_\_

Please check one: Member \_\_\_ Associate Member \_\_\_ Other: (explain) \_\_\_\_\_

Signature of person authorizing payment: \_\_\_\_\_

**Registration Fee \$25 per person**

List Person(s) Registering	Title or Position with Organization
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	

Check One:

\_\_\_ Payment Enclosed \$ \_\_\_\_\_

\_\_\_ Bill My Organization \$ \_\_\_\_\_

BILL: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Send Completed Pre-Registration Forms to:

Southern Plains Indian Housing Association

Attention: Jodie Humphers

P. O. Box 788

Ada, OK 74871-0788

SPIHA use only

Date Received