



National Indian Gaming Commission Sacramento Region

Regulatory Review Consultation
Chukchansi Gold Resort & Casino
September 15-16, 2011

Consultation Registration Form

Tribe Information

****All fields are required****

Tribe Name

Entity registrant represents

If you [do not](#) represent a Tribe/Tribal Casino/Tribal Gaming Commission entity, please enter agency name above.

Attendee Information

Name (First & Last)

Position/Title

Business Street address

City/State/Zip

Business contact phone number

Ext.

*include area code - [numbers only please](#)

Business E-mail address

For further information or questions, please contact:

Rita Homa

Executive Assistant

1441 L Street, N.W. Suite 9100

Washington, DC 20005

Phone: (202) 418-9807

Please use this button to [submit via E-mail](#) (Outlook or Internet based e-mail)

or

Please use this button to [print & submit via fax](#) to
(202) 632-0045

NOTE: Please use a separate form for each attendee