(Guest's First & Last Name)



TOTAL RECEIVED: \$\_\_

## 26th Annual Trail of Tears Association Conference & Symposium

Conference & Symposium
October 16-18, 2023
Cherokee Casino & Hotel
Highway 59S & US 412
West Siloam Springs, Oklahoma

## West Siloam Springs, Oklahoma **REGISTRATION FORM** (One form per Registrant Please)

REGISTRATION FURIVI (One form per Registrant Please)				
Contact Information				
1. Name (as wanted on name badge):	2. Organization Representing (if applicable):			
Mailing Address:				
4. City:	5. State:		6. Zip Code:	
7. Telephone: ( ) –	8. Fax: ( ) –			
9. Email:				
Registration				
10. Regular Registration	11. On-Site Registration			
□ TOTA 2023 Member: \$125 □ Non-member: 175 <sup>♦</sup>	□ TOTA 2023 Member: \$225* □ Non-member: \$275•			
♦ Non-member registration includes TOTA membership through 2024.	Non-Member Registration includes TOTA membership through 2024.			
12. ☐ Tuesday Field Trip by bus to Tahlequah Town Sq Museums ☐ I would like to tour Hunter's Home at Park Hill	☐ I will need to utilize Handicap access bus if available ☐ I will use personal transportation to Tahlequah on Tuesday.			
13. Meals: Breakfast will be provided on Tue & Wen Hors d'oerves -Lunch will be provided Tue. & WenDinner will be provided Tue.	Undate Notifications  Please check whether you wish to receive confirmation and updates via regular mail or by Email.  □ USPS mail □ Email			
14. Guest Meals I need to register my guest,			, for the following meals:	
Mon. Reception \$25 \( \text{ /Tue. Breakfast - } 30 \( \text{ /Tue. Field Trip Lunch - } 30 / \( \text{ Tue Dinner-} 30 / \( \text{ Wen. Breakfast - } 30 / \text{ Wen. / Lunch-} \$30 \( \text{ / Guest Meals TOTAL: } \)				
TOTAL FEES				
<b>15.</b> Registration Fee from Line 10 or 11 = \$				
<b>16.</b> Guest Meal Fees from Line 13 and 14 = \$				
17. Total Registration fees = \$				
For TOTA office use only:           CK AMT: \$         C.           P.O. AMT: \$         P.			CASH: \$ CONF #:	

RECEIVED BY:\_

DATE:\_

Field Trip Waiver Please sign this liability waive	r if you plan to participate in the field trip.	
permissible any private or public (state or federal or instrumentality of trip, or outing takes place, or through which it travels, in connection w in whole or in part for any loss, damage, injury to person or property, of schedules, program, or itinerary, or mechanical defect or failures, or for	ion (TOTA), its chapters, directors, officers, employees, and agents, nor to the extent legally either), landowner or tenant or licensee in possession of any land or over which any tour, field ith or as a part of any meeting or convention of TOTA shall have any responsibility or liability, delays and delayed departure or arrival, missed carrier connections, cancellations, changes in or any negligent act or omissions of any nature whatsoever which results from, or arises out of, thereat, or part of any of the foregoing. All persons registering at or attending any such meeting issented and agreed to the same by such registration or attendance.	
Sign	Date	
<b>Cancellation Policy</b>		
A written and signed notice of cancellation must be submitted to the Trail of Tears Association, 412 N Hwy 100 Suite "B", PO Box 329, Webbers Falls, OK 74470, in order to receive a refund. A 50% refund will be granted if notice is received by Oct. 2nd, 2023. NO refunds will be granted after Oct. 2nd, 2023.		
Make Check or Money Order Payable to: Trail of Tears Association  Send to: Trail of Tears Association  PO Box 329  Webbers Falls, Oklahoma 74470		
	Call: 918-422-6301 for reservations Ask for: Room Block Code # 1510 <i>TOTATR</i> Rooms are \$99.00 plus tax(Total-\$121.54)	
Room Block Closes or when sold out.		
Questions? Contact Roy Barnes at nationaltota@gmail.com or (918)	3-464-2258) or Troy Poteete at troywaynepoteete@gmail.com	
Visit our website at <a href="https://www.nationaltota.com/">https://www.nationaltota.com/</a> for or	nline registration	