20TH ANNUAL SHOSHONEAN NUMIC LANGUAGE REUNION
“Reviving the Past to Awaken the Future”
September 16, 17 & 18, 2019
Comanche Nation Complex, Lawton, OK

Individual Registration________________________

Tribe/Group/Family (Name)____________________

Phone ( )

Please check the following that you will be participating in:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TRIBE</th>
<th>ELDER</th>
<th>ADULT</th>
<th>YOUTH</th>
<th>Male/ Female</th>
<th>Attend Workshops</th>
<th>Tribal Speaker/ Presenter</th>
<th>Veteran Color Guard</th>
<th>Youth Activities</th>
<th>General Sessions</th>
<th>Participate in Contests</th>
<th>T-Shirt Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADDITIONAL PARTICIPATION ITEMS:

CHECK the following that you will participate in:

___ Demonstrate (Native Craft)
___ Family Table
___ Archery Contest
___ Shiny Ball
___ Participate in FASHION SHOW
___ VOLUNTEER (Conference, Serve Food, etc)
___ Tee Pee Contest
___ Fry Bread Contest

MAIL COMPLETED FORMS TO:
Charlene Tahdooahnippah
PO Box 9
Cache, Oklahoma 73527
OR
Email: tahdooahnippahc@yahoo.com
Fax: (580) 429-6520

NEEDS: (Medical, Handicap, etc) YES___NO___