



SPRING SHOWCASE 2010
"Lead the Way....Enjoy the Journey"



April 27 - 29, 2010
Seven Seas Inn & Conference Center
Mandan, ND
For Reservations Call 1-800-597-7327

Name _____
 Title _____
 Address _____
 City/State/Zip _____
 Agency Represented _____
 County Represented _____

- JOB DESCRIPTION**
- _____ Eligibility/Income Maintenance
 _____ Director/Administrator/Supervisor
 _____ Clerical Support
 _____ Social Worker
 _____ Board Member
 _____ Student
 _____ Other

REGISTRATION: Complete Conference Package: \$45.00
 (includes lunch and brunch)

Student Conference Package: \$25.00
 (includes lunch and brunch)

Amount Enclosed \$ _____

Make checks payable to: Dacotah Foundation/Spring Showcase

Complete and mail this registration form with payment by April 16, 2010, to:
North Dakota Department of Human Services
SNAP Unit
600 East Boulevard Avenue
Bismarck, ND 58505.

Registration fees are non-refundable. Participation is limited to the first 200 registered persons.

Office Use Only

Date Received: _____ By: _____ Amount Received: _____
 Date Entered: _____ Cash _____ Check _____ Voucher _____