

MCF PROGRAM REGISTRATION FORM



MINNESOTA COUNCIL
ON FOUNDATIONS

Please print out and mail this completed form with your check. To pay by credit card, please register online at www.mcf.org. *Payment must accompany registration form.*

This program is only open to invited individuals. Please contact Chantel Karney at 612.465.0715 with questions.

Date	Program	Location
November 7, 2011	Power and Purpose: Minnesota and Tanzania Working Together	Neighborhood House, St. Paul

Name: _____

Title: _____

Organization: _____

Address: _____

City, State and Zip: _____

Phone: _____

Fax: _____

E-mail: _____

Please note any special accommodations (dietary, hearing impairment, mobility, etc.):

Send completed form with your check made out to the Minnesota Council on Foundations to:

Minnesota Council on Foundations
100 Portland Avenue South, Suite 225
Minneapolis, MN 55401-2575

Questions? Please email ckarney@mcf.org

Registration Deadline:

All registrations must be received by November 2, but register early because space is limited.

Cancellation Policy:

If you must cancel your attendance, please notify MCF at least three full days prior to the program to ensure a refund.

Please select the classification that best describes you:

I am affiliated with a (please check one):

- Grantmaker
- NGO
- Faith-Based Organization

And the organization's annual budget is (please check one):

- More than \$1 million **Fee: \$85**
- Between \$250,000 and \$1 million **Fee: \$50**
- Less than \$250,000 **Fee: \$40**

I am an:

- Academic **Fee: \$40**
- Tanzanian Diaspora **Fee: \$40**
- Other individual **Fee: \$40**

Amount Enclosed: _____