

## 2017 LAKHÓTIYAPI SUMMER INSTITUTE

JUNE 05 - JUNE 30, 2017 DON'T MISS OUT!
SITTING BULL COLLEGE, FORT YATES, ND

2017 LSI Registration Form

<del>-</del>					
E-mail:					
Name:					
Job Title:	Company/Organization:				
Address Line 1:	Address Line 2:				
City:	US State/	Canadian Pro	ovidence:	Zi	p Code:
Work Phone:	Ext: Fa		<b>K:</b>	Cell:	
I am a ☐ Male ☐ Female. I am a ☐ Second Language Learner ☐ Fluent Lakota/Dakota Speaker					
Date of birth:	T-Shirt Size: S M L XL XXL XXXL				
LODGING AND MEALS					
☐ I need accommodations Check In Da			Check Out Date:		
☐ I do not need accommodations					
Room/Bed Preference: No Preference		King	Two	Doubles	Queen
Smoking: No Preference:		Smoking	No Smoking		
Sharing With: Adjoining With:					
Any additional information:					
LODGING INFORMATION – OTHER					
☐ I plan to check out of the Lodge for Weekend #1:			Friday, June 9th through Sunday, June 11th		
☐ I plan to check out of the Lodge for Weekend #2:			Friday, June 16th through Sunday, June 18th		
☐ I plan to check out of the	Friday, June 24th through Sunday, June 26th				
☐ I plan to check out of the Lodge for Weekend #4: Friday				ne 30th throug	h Sunday, July 2nd

## **COLLEGE CREDIT OR CEU'S**

- ☐ I want to take these LSI Courses for College Credit through Sitting Bull College.
- ☐ I want to take the classes for CEU's only (no college credit).

Please choose your schedule by checking the appropriate circle.

- ☐ SCHEDULE 1 1st Year Attendee
- □ SCHEDULE 2 2nd Year Attendee
- □ SCHEDULE 3 3rd Year Attendee
- ☐ SCHEDULE 4 4th Year Attendee
- □ SCHEDULE 5 5th+ Year/Fluent Speaker Attendee
- ☐ SANTEE DAKOTA
- ☐ YANKTONAI DAKOTA

Return to: Sunshine Archambault Carlow, SRST Education Manager Agency Ave. PO Box D Fort Yates, ND 58538

Phone: (701) 854-8583 Fax: (701) 854-2175 scarlow@standingrock.org

## **Sponsored By:**





