



LEED 101 Registration Form

Name: _____

Business Name: _____

Address: _____

Office Phone: _____ Contact Phone: _____

Email: _____

Tribal Affiliation:

- | | | |
|---|-----------------------------------|--|
| <input type="checkbox"/> Cherokee | <input type="checkbox"/> Lumbee | <input type="checkbox"/> Occaneechi-Saponi |
| <input type="checkbox"/> Coharie | <input type="checkbox"/> Meherrin | <input type="checkbox"/> Waccamaw-Siouan |
| <input type="checkbox"/> Haliwa-Saponi | <input type="checkbox"/> Sappony | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (please specify) _____ | | |

This class is funded through the Golden LEAF Foundation, and part of the grant requires participants to provide data about the impact of the course. By completing this form, you agree to the following terms:

- To attend the entire class on November 12, 2011
- To report successful completion of LEED certification
- To report all jobs and business opportunities created as a direct result of the LEED certification
- To report data of all bid submission (awards and denials)

I understand that ALL data provided by and received from my company is CONFIDENTIAL and will only be used to evaluate and improve the program.

Name, Title

Date

Please return completed registration to Brenda.Pollard@nciedi.org
or via fax at (919) 232-9416... Thank You !!!

