



SHOSHONE-BANNOCK TRIBES

Employers Registration

Please Print

Company Name: _____

First Name: _____ Last Name: _____

Phone: _____

Address: _____

City _____ State _____ Zip/Postal _____

Email: _____

How many persons attending? _____ (Max 2 or \$25.00 charge for additional persons)

Attendee #1 _____ Attendee #2 _____

Attendee #3 _____

Sponsor fee \$500.00 or Vendor fee of \$200.00. Please provide method of payment below.

Credit Card Pay at Event Check/Money Order Non-profit (must be prior approved)

CC#: _____ Exp Date: _____ CCV #: _____

Register Online: www.sbtribes.com/job-fair

To pay by phone, please call Accounts Receivable at (208) 478-3747

Payments with check or credit card can be mailed to:

Shoshone-Bannock Tribes
ATTN: Vocational Rehabilitation Program
P.O. Box 306
Fort Hall, ID 83203

Special Accommodations:

No Show, No Refunds – All Refunds Will Follow COVID Policy