



NATIONAL VETERANS CREATIVE ARTS FESTIVAL

PARTICIPANT REGISTRATION CHECK LIST

You must completely and correctly fill out the enclosed packet, or your application **will not** be processed!
Registration deadline is _____.

YOU MUST INCLUDE THE FOLLOWING FORMS FILLED OUT COMPLETELY. DO NOT SEND APPLICATION WITHOUT ALL OF THE FOLLOWING:

- PARTICIPANT REGISTRATION FORM (VA Form 0929b) (2 Pages)
- PARTICIPANT MEDICAL INFORMATION (VA Form 0929c) (2 Pages)
- TRAVEL INFORMATION (VA Form 0929d) (Can be sent later if travel information is not known, but please provide by _____.)
- FAMILY AND FRIENDS LODGING AND MEALS (VA Form 0929e) (If applicable) (2 Pages)
- PARTICIPANT AGREEMENT (VA Form 0929f)
- TICKET REQUEST (VA Form 0929g) (If applicable)
- PARTICIPANT CLEARANCE FORM (Please verify with your staff contact person that he/she will be completing and submitting this form.)

RETURN ALL COMPLETED FORMS BY _____
TO:

Stephanie Torian
Host Site Coordinator (05/Vol)
VA Sierra Nevada Health Care System
975 Kirman Avenue
Reno, NV 89502
Phone: (775) 328-1411 / **Fax:** (775) 337-2276
Stephanie.Torian@va.gov