

✂ Registration Form – Behavior Seminar Jan. 20, 2017

Participant Information (please print or type)

| | |
|--------------|--|
| Name | |
| Address | |
| City/ST/Zip | |
| Role | |
| Organization | |
| Phone | |
| E-Mail | |

Attendance information: *payment and forms can be mailed to DSA 1929 Canyon Road, Vestavia Hills AL by January 15, 2018

| | |
|---|--|
| Reg: by 1/15/18 | PARTICIPANT CATEGORY – PLEASE NOTE THAT CHILD CARE IS NOT PROVIDED |
| \$50 <input type="checkbox"/> | Individual (no CEU's) – 1 lunch |
| \$85 <input type="checkbox"/> | Two Parents (no CEU's) – 2 lunches |
| \$50 <input type="checkbox"/> | Professional – 1 lunch (CEU's applications \$25 will be available & payment due on 1/20) units TBA |
| \$50 <input type="checkbox"/> | Exhibitor #1 (1 table – 1 staff member – 1 lunch) |
| \$70 <input type="checkbox"/> | Exhibitor #2 (1 table – 2 staff members – 2 lunches) |
| \$ | I wish to make a donation to DSA - Down Syndrome Alabama for amount specified |
| Groups of 10 or more 15% off Questions Contact Sue Tolle 205-988-0810 downsynromealabama@gmail.com | |

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