

ACCESS Founder's Series

Professional Seminars Registration Form

Workshop fee per person:

Professional Seminars: \$50

Contact Shalene Hammons at 501-217-8600 to discuss bringing our trainings to your organization.

Names of Attendees (Please Print)

Mr/Mrs/Ms _____ Professional/Parent (circle one)

E-Mail Address: _____

Title of Course: _____ Date: _____

Professional Title and ages/grade of children you work with or age/grade of your child: _____

Mr/Mrs/Ms _____ Professional / Parent (circle one)

E-Mail Address: _____

Title of Course: _____ Date: _____

Professional Title and ages/grade of children you work with or age/grade of your child: _____

Registration Information

Cancellation: If you cannot attend, you may send a substitute-however we request the contact information at least one week prior to the course date. ACCESS requires a minimum number of participants for each course; if necessary & with notice we will cancel the course with a full refund to the participant. The registration fee is required to register.

Tax Deduction: Continuing Education is tax deductible, contact your accountant for details.

CEU/CPE: Continuing education may be recognized by your professional board. ACCESS will provide a full course description, date and number of direct training hours to each participant.

Company Information (Please Print)

Contact: _____ Organization: _____

Address: _____

Phone #: _____ Fax #: _____

Method of Payment

Check payable to ACCESS Group, Inc is enclosed

Charge to: MasterCard Visa Amount: _____

Card No: _____ Exp. Date: _____

Signature: _____

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