

REGISTRATION FORM

Character Development Seminar

TO REGISTER, CHOOSE ONE OF THE FOLLOWING METHODS:

- Enroll online using our secure server at <http://www.CharacterCounts.org/CDS>.
- Or fax this form to 310-846-4858.
- Or mail this form to Josephson Institute, ATTN: Character Development Seminars, 9841 Airport Blvd., # 300, Los Angeles, CA 90045.

(Before registering, please call 800-711-2670 to confirm that space is still available.)

– IMPORTANT –

ATTENDANCE, CANCELLATION, AND ROLLOVER POLICIES

– Please read carefully before enrolling –

PARTICIPANT INFORMATION

- Home Address Business Address (No P.O. Boxes please)

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

E-mail _____ (required for registration)

- Age group with whom you work: elementary middle high
 other _____

BILLING INFORMATION

- Check if same as participant information

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

E-mail _____

HOW YOU LEARNED ABOUT THIS CHARACTER COUNTS! (CC!) TRAINING SEMINAR (PLEASE SELECT ONE):

- | | | |
|---|--|--|
| <input type="checkbox"/> Friend/word of mouth | <input type="checkbox"/> Other website | <input type="checkbox"/> Advertisement |
| <input type="checkbox"/> CC! Email | <input type="checkbox"/> CC! mailing | <input type="checkbox"/> Search engine |
| <input type="checkbox"/> CC! Website | <input type="checkbox"/> Conference | <input type="checkbox"/> Other |

PAYMENT INFORMATION

Please check one:

- I'm enrolling in the three-day training and enclosing \$825.
- I'm enrolling at least 45 days before the seminar start date and enclosing \$775.
- My organization is a Coalition member and I'm enrolling and enclosing \$775.
- My organization is a Coalition member, I'm registering at least 45 days before the seminar start date, and enclosing \$725.

PAYMENT METHOD

Note:
Registration form must include full payment.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Security Code

--	--	--	--

- Purchase Order #** _____
 (If faxing, include a copy of your purchase order when available.)

- Check.**
 Please make payable to "Josephson Institute."
 (If faxing, include a photocopy of the check.)

(The Security Code is usually the last three or four digits that appear on the back of your credit card in the signature panel or following the card number on the front side.)

Expiration Date _____ Billing ZIP _____

Signature (required) _____ Date _____

Primary cardholder's name _____

2010 CHARACTER DEVELOPMENT SEMINAR DATES

Circle which seminar you wish to attend:

Feb 24-26	Phoenix	⋮	June 9-11	San Antonio	⋮	July 14-16	Chicago
March 10-12	Chicago	⋮	June 16-18	San Francisco	⋮	August 3-5	Philadelphia
April 14-16	Los Angeles	⋮	June 21-23	Minnneapolis	⋮	August 9-11	Los Angeles
April 19-21	Fort Wayne	⋮	June 29 - July 1	Los Angeles	⋮		

