

CUSTOMIZED WORKSHOP REGISTRATION FORM

You are invited to attend a one-day certification workshop, where you will learn to administer and interpret PREPARE/ENRICH.

Please fill out the registration form below. Make sure you fill it out completely and send it to the facilitator listed.

Please register me for the Workshop on *02/13/2012* from *10:00 AM - 4:00 PM* at **Catholic Charities North Dakota, 5201 Bishops Blvd Ste B, Fargo, ND** conducted by **Peter A. Edwards**.

Mail registration to:
Peter A. Edwards, 5201 Bishops Blvd Ste B, Fargo, ND 58104-7605.

Make checks payable to: **Catholic Charities ND in the amount of: \$175.00.**

Registration Deadline Date is: **02/03/2012**

Name: _____

Occupation: _____

Position in
Agency/Church: _____

Agency/Church: _____

Address: _____

City: _____

State: _____

Zip: _____

Daytime Phone: _____ Email: _____

Please send this registration form and registration fee to the address listed.
Please keep a copy of your registration form for your records.