

Registration Form

Region 4 Education Service Center Professional Development

Please fill out form below and mail to address indicated or fax to 713-744-2723.

Faxed registrations will be accepted if you are: 1) paying with a credit card (Only MasterCard/VISA and American Express are accepted) or 2) paying with a purchase order. **See the Professional Development Catalog for more information or visit www.theansweris4.net.**

Please register at least two weeks prior to the scheduled session. Programs with fewer than 20 participants registered two weeks prior to the program date are subject to cancellation. On-site registration is not recommended. You are not guaranteed admittance to a session if you choose to register on-site. There will be a \$10 processing fee for any cancellations prior to beginning of workshop. Refunds will not be given for non-attendance or cancellations received after the session.

Region 4 ESC is accessible to individuals with disabilities. If you require special arrangements or have special needs in order to participate in a session, please contact the Region 4 ESC Registration Services (see numbers listed below) five working days prior to the training program date.

Make check payable to Region 4 Education Service Center unless otherwise designated.

You will be contacted by Region 4 ESC only in the event that a session is full or cancelled. In such cases, the e-mail address you provide below will be used to contact you.

Last Name _____	First Name _____	Middle Initial _____
e-Mail Address _____		
Home Address _____	City/State/Zip _____	
Home Phone _____	Position _____	District Name _____
Campus Name _____	Campus Address _____	
Campus Phone _____	City/State/Zip _____	

event number _____	event title _____
date _____ time _____	fee (if applicable) _____

event number _____	event title _____
date _____ time _____	fee (if applicable) _____

event number _____	event title _____
date _____ time _____	fee (if applicable) _____

Fee will be paid by: MasterCard/VISA/American Express **Purchase Order**

Credit Card/Purchase Order # _____

Amount _____ Credit Card Expiration _____

Name as printed on card _____

Card Holder Billing Address _____ Card Holder Billing Zip Code _____

Check **Check #** _____

Check Amount _____ **Date Received** _____

Mailing Address: Registration Services
 7145 West Tidwell
 Houston, Texas 77092-2096
 Phone: 713-744-6326 or 1-800-695-1825 **Fax Number:** 713-744-2723



On-line registration is available for individuals paying with MasterCard/VISA or American Express
Visit www.theansweris4.net and click on e-Catalog to register

PHONE REGISTRATIONS ARE NOT ACCEPTED

A cumulative record of SBEC-required CPE clock hours is provided in My Portfolio, available at www.theansweris4.net.

It is the policy of Region 4 ESC not to discriminate on the basis of race, color, national origin, sex, or disability in its vocational programs, services, or activities as required by Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973. Region 4 ESC is an equal opportunity employer.