

More Money....More Mission

June 22, 2010

Registration Form



Name:

Organization:

Address:

Phone:

Email:

Please check
whichever
applies:

Registration Fee Attached with the form

Check #:

(make check payable to Community Connections of NY, Inc.)

Purchase Order Attached with the form

PO #

Yes, I would like a certificate of completion mailed to me after the training

No thank you, I do not need a certificate of completion