



April 2014 Webinar Registration

Choose your registration type: Individual (1 person from a member site)
 Group (more than 1 person from the same member site) *Copy this page for each registrant*

Organization Name					
First & Last Name					
PACCA Member #		Keystone STARS participating site?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Email Address					
Street Address					
City		State		Zip Code	
Phone		Fax			

Please indicate the type of credit that you need.

Do you require CEU Credit?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>(If yes, your completed CEU Credit Form <u>must</u> accompany registration form)</i>		
Do you require Act 48 Credit?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>(If yes, enter the following personal information to receive proper credit)</i>		
PDE ID Number		Social Security Number (last 5 digits):			
Do you require DPW Credit?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>(If yes, enter the following personal information to receive proper credit)</i>		
Date of Birth		Social Security Number (last 5 digits):			
Home Address					
City		State		Zip Code	

Please check the workshops for which you are registering.

Date	Workshop	1 st Member	2 nd Member	1 st Non Member	2 nd Non Member	CEUs	Act 48	TOTAL
<input type="checkbox"/> 4/9/14	Do Your Schoolagers Have A Choice?	<input type="checkbox"/> \$15	<input type="checkbox"/> \$5	<input type="checkbox"/> \$30	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$25	\$
<input type="checkbox"/> 4/16/14	Getting Ready for Summer -- School-Age	<input type="checkbox"/> \$15	<input type="checkbox"/> \$5	<input type="checkbox"/> \$30	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$25	\$
<input type="checkbox"/> 4/23/14	Critical Issues in Certification	<input type="checkbox"/> \$15	<input type="checkbox"/> \$5	<input type="checkbox"/> \$30	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$25	\$
<input type="checkbox"/> 4/30/14	Setting Your Tuition Rates and Preparing Your Market Rate Survey	<input type="checkbox"/> \$15	<input type="checkbox"/> \$5	<input type="checkbox"/> \$30	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$25	\$
TOTAL THIS REGISTRATION								

DUE	<input type="text"/>
Amount Enclosed	<input type="text"/>
Check #	<input type="text"/>

FAX this form upon completion to: **(717) 724-9520**
 Then call **1 (888) 296-1917** to process your Credit Card payment
 --OR--

Return completed form with your check made payable to **PACCA** to the following address:
PACCA, 20 Erford Road, Suite 302 | Lemoyne, PA 17043

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