

# Registration Form: Evidenced-Based Practice in Supported Employment

## August 3, 2011, Lexington Hotel, Lansing MI

Please enroll the following:

Name \_\_\_\_\_ Nickname for badge \_\_\_\_\_

Title \_\_\_\_\_ Organization/Agency \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_

Note any special accommodations you may require:

Mail or fax this registration form with **check or purchase order** to: MARO Employment and Training Association, P.O. Box 16218, Lansing, MI 48901 Fax: 517 484-5411, Phone: 517 484-5588.