Event Registration Form

☆ ***Please complete <u>all</u> required sections of this form.***

- Register online for training at www.esc12.net.
- Registration confirmations will be sent via email only.
- Checks, money orders, or purchase orders should be made payable to ESC Region 12 and should accompany this registration form.
- If a session is full or canceled, participants will be notified.
- **Questions? Call (254) 297-1210 or email registration@esc12.net.**

Special Needs (Check If Any)

- ☐ Sign Language
- ☐ Wheelchair Access
- ☐ Braille
- ☐ Interpreter

Other: _____

Special need requests must be received 3 weeks prior to the session selected.

Personal Information

☆ First Name	☆ M.I.	Last Name

☆ **Login/Username (Email address)**

☆ **Password** | ☆ **Last 4 of Social**

Home Mailing Address

City, State, & Zip Code

Home Phone	Cell Phone
( )	( )

Please fill in the appropriate boxes below for each session!

Work Information

☆ **District**

☆ **Campus** | **Work Phone**

( )

Assignment (Check Positions)

- ☐ Administrator
- ☐ Board Member
- ☐ Community
- ☐ Counselor
- ☐ Librarian
- ☐ Nurse
- ☐ Teacher
- ☐ Paraprofessional
- ☐ Parent
- ☐ Sp. Ed-Assessment
- ☐ Sp. Ed-Administrator
- ☐ Sp. Ed-Related Services
- ☐ Sp. Ed Teacher ☐ Speech
- ☐ Pathologist
- ☐ Student
- ☐ Other _____

Credit Card Information

Credit Card Type ☐ **Visa** ☐ **MasterCard**

Card # **Exp.** /

Name on Card

Signature

Session #	Date	Workshop Title	Fee	P.O./Debit

How To Register?

Register Online:
www.esc12.net

Register by Fax:
Events Registration
254.666.2367

Register by Mail:
Events Registration
ESC Region 12
P.O. Box 23409
Waco, TX 76702

Register Onsite:
ESC Region 12
2101 W. Loop 340
Waco, TX 76712