

Registration Form

Household Leader Training

An Action Pact Workshop

Being held at Pennybyrn at Maryfield, a premier household organization

109 Penny Rd, High Point NC 27260

Dates: October 13 – 15, 2009

March 23 – 25, 2010

Oct 12 – 14, 2010

FAX TO: (414)444-8815

For more information call (414)258-3649

_____ # of Participants you are registering X \$800. = _____ (total due)

Name(s) of Participant(s)

	(name)	(position)	(cell #)	(email)
1.)	_____	_____	_____	_____
2.)	_____	_____	_____	_____
3.)	_____	_____	_____	_____
4.)	_____	_____	_____	_____

(list other names on fax cover sheet)

Payment Options:

___ Invoice My Organization for Total: _____

Name of Person completing registration: (please print) _____

Name of Organization: _____

Address of Organization: _____

City _____ State/Province _____ Zip _____

Attention _____ Phone _____

Purchase Order # (if required by your organization) _____

Authorizing Signature _____

Email Address _____

___ Credit Card (1 Payment on Master Card, Visa or AMEX)

Credit Card Number _____

Code _____ Exp. Date _____ Card Type ___ MC ___ Visa ___ Amex ___

Name on Card (please print) _____

Billing Address for Card _____

City _____ State/Province _____ Zip _____

FAX TO: 414-444-8815

FOR MORE INFORMATION PLEASE VISIT US AT

www.CultureChangeNow.com

or call: Action Pact, Inc. 414-258-3649