

Dr. Deborah Goodwin, Consulting

*...and learning for ALL*

## Conference Registration Form

Name Or Names	
SCHOOL DISTRICT	
BILLING ADDRESS CITY,	
STATE, & ZIP	
Email Or Emails	

**REGISTER 2 PARTICIPANTS, GET THE 3rd REGISTRATION FREE OR SEND  
4 PARTICIPANTS FOR \$1000**

<b>December 9-10 COST</b>	\$350 PER PERSON X _____ SEND TWO, GET ONE FREE \$700 X _____ SEND 4 FOR \$1000 X _____ SEND 5 FOR \$1250 X _____	TOTAL: \$ _____
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### Payment Options

<b>Purchase Order</b>	<b>P O #</b>	
<b>Check</b>	<b>Mail to: Dr. Deborah Goodwin, Consulting 8 Royal Circle/ Batesville, AR/ 72501</b>	
<b>Invoice Me After email</b>	<b>Send in registration form to: drdjgoodwin@gmail.com</b>	
<b>mail</b>	<b>8 Royal Circle / Batesville, AR / 72501</b>	
<b>fax</b>	<b>870-793-3035</b>	
<b>Telephone</b>	<b>For Any Questions, Call 501-454-9161</b>	
<b>W-9</b>	<b>Provide Email to send W-9 if needed:</b>	

