

CHD REGISTRATION FORM: 2018 June Workshops

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

CE certificates will be given upon completion of the courses. Please write your email clearly and indicate the course(s) you are taking for CE hours on the form below.

Please write license number next to the appropriate license if you wish to obtain CE hours :

LMSW, LCSW: _____ LP: _____ LCAT: _____

LMFT: _____ LMHC: _____

Please check optional learning choice if you can't attend in person:

Class via telephone: _____ Class via self-study: _____

How did you hear about us? _____

Workshop	Title	CE Hours	Instructor	Fee
			Registration Fee	\$15.00
			TOTAL DUE	

You may register for workshops as soon as you receive this form.

Make checks payable to: Center for Human Development
Mail to: Joan Antelman, Registrar, CHD
 515 E. 14th Street, 8-H
 New York, NY 10009

\$15 registration fee to be paid one time. One check per student please.

Refund Policy:
 100% tuition refund before workshops begin. No refund once workshops begin.