Penn	Consulting

CDA Training Registration Form

Althea Penn, m.ed.adm., Educational Consultant



Please print and complete a STUDENT NAME:	l information.
Social Security Number (Last fou	digits): Date of Birth:
STREET ADDRESS:	CITY
ZIP PHONE NUMBE	R: FAX NUMBER:
E-MAIL	
EMPLOYER NAME:	
SUPERVISOR NAME:	TELEPHONE:
STREET ADDRESS:	CITY
ZIP PHONE NUMBE	R: FAX NUMBER:
WEBSITE	
TYPE OF CENTER: SCHOOL/CE	NTER GROUP DAY CARE FAMILY DAY CARE
Registration	\$330.00 X # of Participants \$ = \$
Registration payment must b	Late registration add \$45 after December 23, 2011 ing the following important information: e received with this form except when paying by credit card. Consulting and mail to: Penn Consulting P. O. Box 49254 Atlanta, GA 30359
We accept Visa and MasterCa	rd. Credit card information:
#	Visa MasterCard
Expiration date:	CVC No. (on back of card)
Authorized Signature	Date
	essing fee for credit card payments. Please ensure the name and zip code above match tion. This may delay processing.
	f you cancel your registration up to ten business days before the course begins, your registration fee

Cancellations/Substitutions: If you cancel your registration up to ten business days before the course begins, your registration fee will be refunded less a \$30 service charge. Cancellations and substitutions must be made in writing (email acceptable). Registration may be transferred to a later session date once.

Withdrawal: Child development instructors may choose to withdraw a student if the student does not meet the course requirements. Students are urged to consult with their instructor or an advisor before making schedule changes. A student is not eligible for any refund if (1) the student fails to formally withdraw in writing; (2) the student is suspended for disciplinary reasons; (3) the student resigns when a disciplinary action or honor code violation is suspected (including plagarism).

Tax Deduction: The expenses incurred for ongoing professional development are tax deductible, when completed to maintain or improve professional skills. Your accountant can provide details.

Questions? Contact Althea at 678.557.8684 or penntraining@yahoo.com

 Signature ______
 Date ______
 Check or m.o. # ______