

CEU Professional Training Registration Form

Titles: Engaging Young Men: Activists for Social Change
Engaging Coaches: A Game-Plan for Violence Prevention

Date: February 18, 2010 9:00am-4:00pm

Registration Information

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **FAX:** _____

E-Mail: _____

Employer: _____

Quick and convenient online registration requires a credit card. Go to www.rapecrisis.com, choose EVENTS/CEU, make your event choice from the drop box and click on



**Registration by mail may be paid by check or credit card
Registration in person may be paid by cash, check or credit card
Make checks payable To: The Rape Crisis Center**

**Mail registration to or pay in person at: The Rape Crisis Center
7500 West U S Highway 90, Dave Coy Building #201
San Antonio, Texas 78227**

Please Circle: VISA American Express MasterCard Discover

Card Number: _____ **Expiration Date:** _____

Card Verification Number: _____ (located on the back of the card – 3 digit #)

Name As It Appears On Card: _____

Billing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Indicate Amount Due:

Session Fee \$10.00

Workshop includes materials, continental breakfast and snack provided