



# REGISTRATION FORM

Please photocopy this form as needed and return to us.

**\*Please Note: An email address is required for each participant for confirmation.**

Today's Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Program Title: **Leadership In Action** Date: \_\_\_\_\_

Attendees: \_\_\_\_\_ Email: \_\_\_\_\_

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**I would like Certification for HRCI Credit Hours**

Program Fee: \$ \_\_\_\_\_

\$ \_\_\_\_\_

*Add 6% (Connecticut Sales Tax) for CT programs*

Total Program Fee: \$ \_\_\_\_\_

### Method of Payment:

Check made payable to EANE is enclosed Authorized by: \_\_\_\_\_

Charge to: Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ American Express \_\_\_\_\_

Card #: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of card holder: \_\_\_\_\_

Billing Address: \_\_\_\_\_

**EANE Members Only:** Bill to the attention of \_\_\_\_\_ PO# \_\_\_\_\_

- Fax a copy of this registration form to us at 413-789-6470
- Register on-line at: [www.eane.org](http://www.eane.org)
- Mail a copy of this registration form to:
 

Employers Association of the NorthEast	or EANE Conference Center	or EANE Training Center
67 Hunt Street, P.O. Box 1070	250 Pomeroy Avenue, Suite 200	67 Millbrook St., Suite 208
Agawam, MA 01001-6070	Meriden, CT 06450	Worcester, MA 01606

### Confirmation:

Your registration will be confirmed with an e-mail confirmation letter and directions.

### Cancellation Policy:

It is our policy to bill registered participants who fail to attend the program and have not cancelled **48 hours prior** to the program start time. Substitutions accepted anytime!

### For More Information:

If you have any questions, call the Employers Association of the NorthEast (toll free) at **877-662-6444**. Please contact us if you need any special accommodations.