

T.W.I.C.E. Educational Services, Inc.
2010 Registration Form

Date: _____

Name _____

Home Ph () _____

Address _____

Cell Ph () _____

_____ Email _____

- _____ PY
- _____ SS
- _____ LMHC
- _____ LCSW
- _____ LMFT
- _____ ARNP
- _____ RN
- _____ Other

License Number: _____

License Number: _____

_____ **January Conference – January 29**
Covenant Life Presbyterian
School personnel: Flat rate
Licensed Professionals: \$50

Lunch Options:	
_____ Standard	_____ Vegetarian

_____ **Ft. Lauderdale**– Friday, October 22, 2010
Hilton Ft. Lauderdale Airport **New: \$175**
Up thru Oct 13: \$139 Oct 14 and after: \$159

_____ **Ft. Myers**– Friday, May 7, 2010
Crowne Plaza Ft. Myers **New: \$175**
Up thru April 27: \$139 Apr 28 and after: \$159

_____ **Gainesville**– Friday, April 9, 2010
Hilton U of FL Conference Center **New: \$175**
Up thru Mar 31: \$139 Apr 1 and after: \$159

_____ **Jacksonville**– Friday, October 8, 2010
Four Points by Sheraton Jax Baymeadows **New: \$175**
Up thru Sept 29: \$139 Sept 30 and after: \$159

_____ **Miami**– Friday, April 30, 2010
Miami Airport Marriott **New: \$175**
Up thru Apr 21: \$139 Apr 22 and after: \$159

_____ **Ocala**– Friday, November 12, 2010
Hilton Ocala **New: \$175**
Up thru Nov 3: \$139 Nov 4 and after: \$159

_____ **Orlando**– Friday, September 10, 2010
Hilton Orlando **New: \$175**
Up thru Sept 1: \$139 Sept 2 and after: \$159

_____ **Sarasota** – Friday, September 24, 2010
Michael’s On East Restaurant **New: \$175**
Up thru Sept 15: \$139 Sept 16 and after: \$159

_____ **Tampa**– Friday, February 26, 2010
Hilton Garden Inn Tampa North **New: \$175**
Up thru Feb 17: \$139 Feb 18 and after: \$159

_____ **West Palm Beach**– Friday, August 20, 2010
Doubletree Palm Beach Gardens **New: \$175** \$ _____
Up thru Aug 11: \$139 Aug 12 and after: \$159

_____ Parking fees: Ft. Lauderdale, Miami, Orlando and West Palm Beach Confirmation and receipt _____ emailed
_____ Informed **“All cancellations must be made in writing and must be postmarked 14 days prior to the course to receive a refund.”** (Postmark or email message) _____ mailed on _____
_____ faxed

Note: _____ **TOTAL DUE \$** _____

PAID BY: Cash _____ Check # _____ Date of Check _____ Credit Card _____

Check one: MC _____ Visa _____ Card # _____ / _____ / _____ / _____

Expiration Date: _____ / _____ Last 3 digits on back of card (Security Code) _____

NAME AS IT APPEARS ON THE CARD: _____

Signature _____ Date: _____