

Registration Form

Teachable Moments Workshop



**Location: The University of New Hampshire Browne Center for Innovative Learning,
Durham, NH**
340 Dame Road Durham, NH 03824 (603) 868-1772 or 1-800-349-1925

Name:

Organization/School:

Email

Address:

Mailing

Address:

Home

Phone:

Work

Phone:

Job

Title/Grade

Level/Subject

Area:

Food Preferences: (Lunch will be delivered to site) vegetarian _____ other dietary requirements _____

Goals for Workshop/Comments:

Photo Release: I give my permission to Experiential Tools or the UNH Browne Center to use photos of Me taken at this workshop in training or marketing materials: _____

Payment Information:

Personal check or school district (employer's) check:

Make out to: Experiential Tools

Credit Card Payment: (MasterCard, Visa)

By phone or form: Call 802-348-7297 or fax form 802-348-7414

Credit Card Number _____ **Exp Date** _____

Please send or fax registration to:

802-348-7414(Fax) or by email to: jen@experientialtools.com

By Mail:

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