



TRAINER CERTIFICATION / "REFRESHER"  
**FAX REGISTRATION FORM**

**June 17th–19th, 2009**

Loews Ventana Canyon Resort • Tucson, AZ

**Registration Information: (Required)**

Trainer Certification Program     "Refresher"\*

*\*"Refresher" is only for those Advocates that have already completed the Trainer Certification Program*

**Date you completed previous Trainer Certification:** \_\_\_\_\_

**Trainer Certification Program:** \$1,400 (\$500 Deposit will be applied toward \$1,400 tuition fee and will be fully refundable, if for any reason the Trainer Certification is cancelled.)

**Refresher Course:** \$500 (\$250 Deposit will be applied toward \$500 tuition fee and will be fully refundable, if for any reason the Trainer Certification is cancelled.)

**Attendee Information: (Required)**

(\*As it should appear on the Trainer Certification Completion Certificate. Please let us know if you want middle initial or any designations used.)

\*Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Title: \_\_\_\_\_

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

Agency Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

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

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

Email to send confirmation numbers: \_\_\_\_\_

**Payment:** If you would prefer, please call us toll-free with your credit card information.

Credit Card to Charge First Nights Room and \*\*\$500 / \$250 Deposit:

\_\_\_\_\_ Expiration Date: \_\_\_\_\_

VISA \* \_\_\_\_\_  MasterCard \* \_\_\_\_\_  AMEX \* \_\_\_\_\_

\*Please provide the 3 digit ID numbers on back of card

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**Hotel Reservations:** *Please be sure to check the correct training dates.*

Please make a hotel reservation for me.  I do not require hotel reservations

How many will be staying? \_\_\_\_\_

Non-Smoking Only

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

**June 17th – 19th, 2009, Loews Ventana Canyon Resort • Tucson, AZ**

Room Rate \$99/night, plus taxes and resort fee

All Rooms are Non-smoking

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**Airline Information:**

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Airline: \_\_\_\_\_ Airline: \_\_\_\_\_

Flight Number: \_\_\_\_\_ Flight Number: \_\_\_\_\_

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**PLEASE FAX TO: (435) 658-3217**

Jane Dale, Director of Marketing

For Questions, please contact us at:

Toll-free: (888) 323-8628, [jdale@advocacysystem.com](mailto:jdale@advocacysystem.com)

\*\* \$500 Deposit will be applied toward \$1,400 tuition fee and will be fully refundable, if for any reason the Trainer Certification is cancelled. \$250 Deposit will be applied toward \$500 tuition fee and will be fully refundable, if for any reason the “Refresher” is cancelled.