

CONFERENCE/TRAINING POSTING FORM

Contact:				
Agency:				
Address:				
	City	State		Zip
Agency Phone:	Fax:			
E-mail:	_			
Post on Web:	Date to be Posted—Star		Date to Remove	o Docting End
List Training or Web Link:	Date to be Posted—Star	L	Date to Remove	e Posting—End
also responsible for		d end-date. Once ATSA	receives the payme	for tracking end-date. Agency is ent and conference listing, it will as.
 E-mail Kelly file. PDFs of Complete th Conference/ 	the Conference/Training is form and fax/email/mail	the Conference/Training registration brochure or p to Kelly McGrath at the A provides Conference/Trai	posting as an atta rogram are encour ATSA office with a \$ ning postings at no	\$200.00 payment per each cost to active state chapters.)
Payments must be n	nade by check, money ord	ler or accepted credit car	d (sorry, no purcha	se orders).
Method of Payment CREDIT CARD NUMBER SECURITY CODE: last 3 BILLING ADDRESS: (credit card users only)	digits on back of card, or 4 digits		TAL AMOUNT TO	EXPIRATION DATE CHARGE: \$
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