



Administrative Risk Management Training
REGISTRATION FORM
 Sponsored by NOLS Professional Training
 San Francisco, CA | May 15-16, 2012

Applicant's Personal Information:

Name: _____ Birth Date: ____ / ____ / ____
last first middle preferred Month Day Year

Permanent Address: Street (include apt, box, etc.): _____

City: _____ State _____ Zip _____
City State Zip

Permanent Phone Number: _____ E-mail address: _____

Organization Title Sex: (check one) F M

Have you participated in a NOLS PRO/WMI/LNT course before? Course and date: _____

How did you hear about this training? _____

Please check the box that best describes you: (optional)

- American Indian or Alaskan Native Asian or Pacific Islander Black, not of Hispanic origin
 Hispanic or Latino White, not of Hispanic origin Multiracial Other Country of Citizenship: _____

Which category best describes your program? Adventure Education Adventure Travel Camp
 Secondary School College or University Research Study Abroad Program Other _____

How are you hoping this course will benefit your program?

PAYMENT INFORMATION

Deposit of \$250 due at time of registration with remainder of tuition due April 24, 2012, payable by check or credit card. If you pay only the deposit you will need to resubmit another form of payment prior to deadline.

Full tuition: \$565 **Discounts Available:** NOLS/WMI Gradate—subtract \$56.50
 AEE Member—subtract \$56.50
 AEE Accredited Program—subtract \$141.25

Amount to be charged to credit card: _____ VISA or MASTERCARD (circle one)

Account number: _____ Expiration date: _____

Name as it appears on card: _____

Signature: _____