



AUBERLE

## Training Registration Form

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

Date(s): \_\_\_\_\_

Participants Name(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

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

Contact Person: \_\_\_\_\_

Phone & Fax: \_\_\_\_\_

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

Fee Scale: \$10.00 per hour of training

Full Day: \$75.00

Total cost: \$ \_\_\_\_\_

Form of Payment (check one):

Check enclosed (Payable to Auberle. Attn: Finance Dept.)

Invoice me

Email or Fax your registration to:

Training Manager

Auberle

1101 Hartman Street

McKeesport, PA 15132

Telephone: 412-673-5800 X1218

**Fax: 412-346-0053**

[tuanl@auberle.org](mailto:tuanl@auberle.org)

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