



Webinar Registration Form

Please complete this registration form, make one copy for your records and return with payment to:
Michigan Association of School Boards
1001 Centennial Way, Ste. 400, Lansing, MI 48917-8249
P: 517.327.5900 · F: 517.327.0776

Full Name *(please print)*

Cell Number (for MASB use only)

Representing District/Company Name

Email (required)

Address, City, Zip

District Contact Person

Contact Person Phone

Contact Person Email

Selected Course	Date	Time	Amount
			\$50
			\$50
			\$50

Registration Policy

Coordinate all registrations through your district office. One registration form per participant. Registrations are appreciated at least seven days before an event. Classes are filled in the order that completed registrations are received at MASB. You'll receive an email confirming your registration. MASB reserves the right to CANCEL any classes. Programming canceled by MASB may be rescheduled. Confirmations are generated upon receipt of your registration by MASB. If you don't receive a confirmation within five business days, please contact Mary McCarthy at mmccarthy@masb.org. Registration and attendance at, or participation in MASB's conferences, Board Member Certification Classes and other activities constitutes an agreement by the registrant to MASB's use and distribution of the attendee's image or voice in photographs, videos, electronic reproduction and audio of such events.

Cancellation Policy

No refunds will be given for cancellations received within seven days of the event. Cancellations prior to this date will be charged a \$25 cancellation fee. Substitutions may be made in lieu of cancellation. All cancellations must be in writing.

Special Accommodations

Registrations requiring special accommodations should contact Angel Davis at 517.327.5926 or adavis@masb.org at least seven days prior to the class/event you plan to attend.

Payment Information

Check enclosed made payable to: MASB Check # _____

Check to follow – Registration faxed in advance

Invoice school district and apply \$25 billing fee **Attn:** _____

Credit Card Payment (VISA and MASTERCARD accepted)

Account # _____ Exp. Date _____ Card Security Code _____

Signature of Card Holder _____

Any questions, please contact Mary McCarthy at mmccarthy@masb.org or 517.327.5918.