

**REGISTRATION FORM FOR REGION II TRAINING ACADEMY**

**JUNE 1-2, 2020**

**WYNDHAM GARDEN HOTEL, YORK, PA**

**NAME:**

**EMAIL ADDRESS:**

**HOME ADDRESS:**

**HOME PHONE:**

**CELL PHONE:**

**CHAPTER NUMBER:**

**PLEASE CIRCLE: DC DE MD NJ PA OTHER ( )**

**BREAKOUT TABLES:**

**IN LIEU OF CLASSES, WE WILL BE HAVING BREAKOUT TABLES. BY DOING SO, YOU CAN PARTICIPATE IN ANY OR ALL THE BREAKOUT AREAS AS YOU CARE TO. THUS, NO CLASS SELECTION IS NECESSARY.**

**THESE BREAKOUT TABLES WILL BE OF VARIOUS TOPICS OF CONCERN TO OUR MEMBERS.**

**EXACT TOPICS WILL BE AVAILABLE AT A LATER DATE.**