

Registration

Date _____

Name(s) and Title(s) of Attendee(s) _____

Company Name _____

Primary Contact _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Email _____

Free for Chamber Members **\$20 for Non-Chamber Members**

Total Registration Cost \$ _____ Method of Payment: Check Credit Card

Please bill my account in the amount of \$ _____ Visa Mastercard

Credit Card Number _____ Expiration Date _____

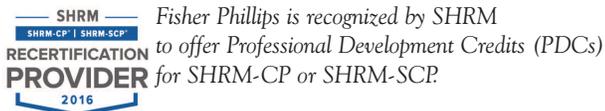
Cardholder's Name as it appears on card _____

Cardholder's Billing Address _____

City _____ State _____ Zip Code _____

All attendees should RSVP to:

Janice Johnson at the Douglas County Chamber of Commerce,
770-942-5022 ext. 303 or via email to: johnson@douglascountygeorgia.com



The use of this seal is not an endorsement by the HR Certification Institute of the quality of the program. It means that this program has met the HR Certification Institute's criteria to be pre-approved for recertification credit.

This program has been submitted to the HR Certification Institute and SHRM for review.