It’s Easy to Register!

**🖅 email** your completed form to:

training@achp.gov

**2020**

**Dates**

August 18-19

September 15-16

October 13-14

November 10-11

December 8-9

**Registration Information**

Registrant:

(Last Name) (First Name) (MI)

Position Title:

Agency/Business Name:

Agency/Business Address:

City: State: Zip Code:

Phone Number (with area code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax Number (with area code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address (receiving course confirmation): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Course Information**

Course Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course Location: Digital classroom on Zoomgov.com

Name on Certificate:

(Please type your name, as you would like it to appear on your certificate.)

**Payment Information - \*payment must be received with registration\***

* Single registrant = $350.00
* For Federal Agencies: Standard Form 182 Training Authorization: **The registration cannot be processed without the following information:**

**Agency Location Code (ALC): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­­**

**DUNS#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_**

**Treasury Account Symbol (TAS): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Your accounting office will have this information)**

**Cancellations:** Registrants who cancel at least 14 days prior to the start of the course will receive a full refund minus a 15% processing fee. No refunds will be given for cancellations made fewer than 14 days before the start of the course; however, substitutions may be made at no cost up until three days before the course begins. All cancellations must be made in writing.

**Accessibility:** Registrants with special accessibility needs should contact 202-517-0205.