

Class Registration Form

To Register for a Class: Complete this form, and return it via fax, e-mail or U.S. mail. (See instructions below.)
Use a separate Registration Form for each class.

Class Name _____	Locator Number _____
Class Start Date and Time _____	Class City _____

List participants in priority order.

1. Name _____
Logon ID _____ Last 4 digits of SSN _____
Agency _____
Mailing Address _____
PO Box _____
City _____ State _____ Zip _____
Phone (____) _____ Fax (____) _____
Email _____

3. Name _____
Logon ID _____ Last 4 digits of SSN _____
Agency _____
Mailing Address _____
PO Box _____
City _____ State _____ Zip _____
Phone (____) _____ Fax (____) _____
Email _____

2. Name _____
Logon ID _____ Last 4 digits of SSN _____
Agency _____
Mailing Address _____
PO Box _____
City _____ State _____ Zip _____
Phone (____) _____ Fax (____) _____
Email _____

4. Name _____
Logon ID _____ Last 4 digits of SSN _____
Agency _____
Mailing Address _____
PO Box _____
City _____ State _____ Zip _____
Phone (____) _____ Fax (____) _____
Email _____

Confirmation

Due to space restrictions, it may be necessary to limit the number of staff from an agency to accommodate as many agencies as possible. You will be notified of your registration status within five working days of the training. Please call (920) 424-1071 if you have questions about your registration status. *Only those individuals with confirmed registrations may attend the training.*

Special Attendance Accommodations

DWD and DHFS are equal opportunity employers and service providers. If you have a disability and need information in an alternate format, or need it translated to another language, please contact (608) 267-0513 or (608) 267-0927 (voice/TDD). For civil rights questions, call (608) 267-0927 (voice/TDD).

Inclement Weather

Call 608-267-1425 for information regarding possible training cancellations due to inclement weather. After five rings, a prerecorded message will announce the status of the training session.

Mail Registration form to:

Susan Hegedus
UW Oshkosh CCDET
800 Algoma Blvd.
Oshkosh, WI 54901

E-mail Registration information to: ptsreg@uwosh.edu

Include class name, date, time, city & locator code; and agency & participant information.

Fax Registration form to: 920-424-1112

Questions Regarding Registration: 920-424-1071