

# REGISTRATION FORM

## Initial Training • Year Three

Wednesday-Thursday  
June 29-30, 2005  
or August 3-4, 2005



**K-12**  
Library  
Initiative

[www.k12library.info](http://www.k12library.info)

### REGISTRATION INSTRUCTIONS

- **REGISTER EARLY — space is limited at each site!**
- The workshop fee is **\$55** (lunch included).
- Registration forms must be received no later than Session 1: **June 1, 2005** or Session 2: **July 5, 2005**.  
**NO ON-SITE REGISTRATION for this event.**
- Please send a check, purchase order, or credit card information with completed registration form for the workshop fee. Registrations will not be accepted without payment.
- Make checks payable to: **Puget Sound ESD**.
- A faxed purchase order will be accepted provided it is complete, approved, and accompanied by a registration form for each person registering on the purchase order.
- Registrants will receive **confirmation by letter**.

#### Clock Hours and College Credit:

See: [www.psesd.org/classes/clockhours/default.html](http://www.psesd.org/classes/clockhours/default.html)

Thirteen clock hours (**\$26**) or one college credit from Seattle Pacific University (**\$65**) are available for this workshop. Payment and registration for clock hours and college credit will occur only on site at each location. **Do not send** clock hour or credit payment with your workshop registration.

#### For Registration Questions or Online Registration:

Call 206.439.6927 or 1.800.664.4549 ext. 6927 or  
See: [www.psesd.org/classes/html/reg\\_help.shtml](http://www.psesd.org/classes/html/reg_help.shtml)

#### Cancellations:

All cancellations must be received, in writing, by  
Session 1: **Wednesday June 15, 2005** or  
Session 2: **Friday July 20, 2005**  
The cancellation fee is \$10.

#### To Request Disability Accommodations

Please notify the site you are attending at least 10 days in advance of the event.

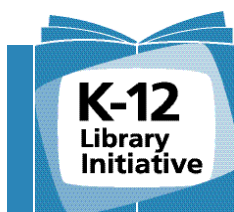
Purchase Order #: \_\_\_\_\_

Check Enclosed: \_\_\_\_\_  Mastercard  Visa

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Total Enclosed: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Return this form with your fee to:  
Puget Sound ESD • M/S KR01  
400 SW 152nd Street • Burien, WA • 98166  
Or FAX us 24 hours at: (206) 439-6915

Participant's Name: \_\_\_\_\_

Current Position: \_\_\_\_\_

Supervisor  Teacher  Librarian  Paraeducator

District: \_\_\_\_\_

Building: \_\_\_\_\_

Elem.  M.S.  H.S.  Tech  Admin.  Other \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

email: \_\_\_\_\_

I give my permission for the Trainers and K12 Library Initiative Steering Committee to use my email address for contacting me.

Signature: \_\_\_\_\_

Please select the date and the location you wish to attend. Both sessions present the same content.

**Session 1: June 29-30**

**MS5LIJSL**  
Shoreline District Center  
Geneva Norton

**MS5LIJCP**  
Clover Park School District  
Kathy Lemmer

**MS5LIJCC**  
Centralia Community College  
Stephanie Carter

**MS5LIJP**  
ESD #123 • Pasco  
Peggy Main

**MS5LIJML**  
Medical Lake Senior High  
Nadean Meyers

**Session 2: August 3-4**

**MS5LIABH**  
Bellingham • N. Heights Elementary  
Analisa Ficklin

**MS5LIAB**  
Olympic ESD • Bremerton  
Wilma Childers

**MS5LIAPS**  
Puget Sound ESD • Burien  
Karen Farley

**MS5LIAV**  
Camas High School  
Rosemary Knapp

**MS5LIAS**  
Selah Junior High  
Jean Gustafson