

# THE PERFORMANCE LEADERSHIP SERIES

## Developing Front-Line Leadership Skills

Fall – Winter 2009-10

### REGISTRATION FORM

Please Type or Print Clearly: *(Copy this form to register multiple participants)*

Participant Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Participant Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

*\* You may cancel your registration up to 30 days prior to the first session and receive a full refund. After that time, no refunds will be given.*

#### Registration Authorization

\_\_\_\_\_  
*Print Name and Title*

\_\_\_\_\_  
*Signature* *Date*

#### Billing

Please send invoice to:

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_

**To register, please contact –**  
**Bob Hanson**  
**Phone: 612-860-5358**  
**Fax: 763-432-0622**  
**Email: [BobH@HansonPerformanceAlliance.com](mailto:BobH@HansonPerformanceAlliance.com)**  
**[www.HansonPerformanceAlliance.com](http://www.HansonPerformanceAlliance.com)**

#### *Please Check Payment Option:*

- \_\_\_\_\_ Bill me once for all 10 sessions at the total of \$3,150.00 per person.
- \_\_\_\_\_ Bill me each month at \$315.00 per person, per session.

\_\_\_\_\_ **Special Incentive:**  
Register 3 or more persons and be billed once at \$2,850.00 per person.

