**registration form**

**LOCAL UNION NUMBER:**

**CONTACT PERSON:**

**CONTACT PERSON’S PHONE/E-MAIL:**

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| --- | --- | --- | --- | --- | --- |
| 1.  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |
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| 2. | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |
|  |  |  |  |  |  |
| 3.  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |
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| 4. | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |
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| 5.  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |
|  |  |  |  |  |  |
| 6.  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |
|  |  |  |  |  |  |
| 7.  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | New Officer Training |  | Financial Training |

Please return this form to: New Officers and Financial Training Seminar USW District 1

 25111 Miles Road-Suite H

 Warrensville Hts., OH 44128

 Or by email to dgranakis@usw.org

