

Registration Form

Family Resource and Youth
Services Centers:
New Coordinator
Orientation

Ramada Plaza Louisville
9700 Bluegrass Parkway
Louisville, Ky. 40299

Sept. 18-20, 2012

*Duplicate this form for each registrant.
Registration forms must be received by **Friday, Aug. 24, 2012.***

Mail: FRYSC
Attn: Katie Morris
275 E. Main St., 3C-G
Frankfort, KY 40621

Email: katie.morris@ky.gov

Phone: (502) 564-4986

Fax: (502) 564-6108

FIRST NAME: _____ LAST NAME: _____

FRYSC REGION: _____ START DATE: _____

SCHOOL/CENTER NAME: _____

WORK ADDRESS: _____

CITY: _____ COUNTY: _____ ZIP: _____

PHONE: _____ FAX: _____

EMAIL*: _____

**Required for confirmation*

PREVIOUS EXPERIENCE WITH FRYSC: _____

**Please plan on staying the entire time
in order to receive your certificate.
If you live over 40 miles away, you must lodge at the hotel.
Exemptions must be presented, in writing,
to your RPM for approval.**

Note: Dinner will not be provided Sept. 18-19.
Please plan accordingly.

We look forward to having you with us!