

26236 Wax Rd. | Denham Springs, LA 70726 | 504-301-7194

**The Business of Retail: Operations and Profit**

**(Google Meet platform)
Virtual Teacher Training & Certification Workshop**

**Type and Email this form to** **Paul@atgfreshstart.com**

**Check off (or X) which training: Register by**

|  |  |  |
| --- | --- | --- |
|  | June 15, 2022—8 a.m.-2 p.m. | **June 8** |
|  | July 13, 2022—8 a.m.-2 p.m. | **July 6** |
|  | August 31, 2022—8 a.m.-2 p.m. | **August 24** |
|  | September 28, 2022—8 a.m.-2 p.m. | **September 21** |

**Registration Form for The Business of Retail—Please Type**

|  |  |
| --- | --- |
| **TYPE** Registrant’s Name |  |
| School Name |  |
| School Street Address  |  |
| School City, State, ZIP |  |
| School Phone w/AC |  |
| School Fax w/AC |  |
| \*Cell Phone w/AC |  |
| Registrant’s School Email Address |  |
| Home Street Address ***(needed to ship textbook; address must be address where you receive mail)*** |  | Apt. # |  |
| City, State and ZIP Code |  |
| \*Registrant’s Personal Email Address |  |

\*We request this in case we need to contact you after school hours, if our emails get blocked by your school system and to text you info on day of training. Please provide this info.

|  |  |
| --- | --- |
| **Please type:** Approval to attend this virtual training has been obtained from (name of person) |  |
| whose title is |  |

**Invoicing**

|  |
| --- |
| **Send the invoice for this $295 training to** |
| Name of Person |  |
| Email Address of Person |  |
| Title of Person |  |
| School District Name |  |
| # and Street Name of Person |  |
| City, State & ZIP Code of Person |  |

*Checks should be payable to* ***A T&G Fresh Start****.*

*A w-9 form will be sent with the invoice once the registration form is received.*