

Registration Form for Training
Validation of Skills 2010

San Andreas Regional Center
300 Orchard City Drive, Suite 170
Campbell, CA 95008
408-374-9960

Administrator and 2 staff from each facility- Space is limited!

Check the box for the date you will attend and

email it to cespinoza@sarc.org

You can fax it, but please make sure writing is legible:

Clementina Espinoza at 408-376-0586

CHECK ONE (or double-click to insert an x. Save and email back):

January 19, 20, 21	T, W, Th	9:30 am to 12 noon	<input type="checkbox"/>
April 20, 21, 22	T, W, Th	9:30 am to 12 noon	<input type="checkbox"/>
July 20, 21, 22	T, W, Th	9:30 am to 12 noon	<input type="checkbox"/>
October 19, 20, 21	T, W, Th	9:30 am to 12 noon	<input type="checkbox"/>

2 CEs for Administrator's Certificate if you pass the test!

Name _____ **(print clearly)**

Facility: _____

Phone #: _____

email address: _____

***DUE TO LIMITED SPACE, REGISTRATION WILL BE LIMITED.
YOUR SPACE WILL BE CONFIRMED BY EMAIL.**

TRAINER: LISA WENDT, RN LOCATION: CAMPBELL OFFICE