

HSTW, SW OHIO EVENT REGISTRATION BY FAX
Please Fax this completed form to Missy Kramer: 513-851-4791

The Event I am registering for is: _____

The date of the event: _____

OF ATTENDEES FOR THIS EVENT: _____

Team Contact Information

Please note all team contact information is *required*, you must complete all items for registration

Full Name: _____ Position/Title: _____

School/Organization: _____

Street Address: _____

City: _____ Zip Code: _____

Fax Number: _____ Work Phone: _____

E-Mail Address: _____ Is Team Contact Attending? _____

PLEASE LIST ALL MEMBERS ATTENDING, THEIR POSITION, THEIR FULL TITLE AND THEIR BUILDING. Please check the flyer information for the recommended number of people to register.

<u>Name</u>	<u>Role</u>	<u>Building</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use the space below for any additional information you need to communicate such as: special dietary requirements, changes to your registration, alternate team members etc.

Should you require any more information, or have special needs or requests, please e-mail register@hstw.org or call Missy Kramer at 513-619-2330.