



Accelerated[®]innovation[®]
and Creativity Training

plan-a-date-to-innovate™

USE THIS WORKSHOP REGISTRATION FORM – FAX to (312) 829-2852

How did you learn about the workshop? (Please provide name so they can be thanked!)

Name of First Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Organization _____

Address _____

City _____ State _____ Zip _____ Country _____

Email _____

Organization Website URL _____

Office Phone _____ Mobile Phone _____

_____ Total Number of Participants Registering from your Organization (list additional names below)

# Registrants	Tuition for 2-day Workshop
_____	\$1,488 for 1 Registrant (only \$744 per day)
_____	\$1,190 per Registrant for 2-4 people for any workshops in any city (Save 20% - \$595 per day)
_____	\$892 per Registrant for 5 or more people for any workshops in any city (Save 40% \$446 per day)

# Registrants	Tuition for 1-day Workshop
_____	\$988 for 1 Registrant
_____	\$788 per Registrant for 2-4 people for any workshops in any city (Save 20%)
_____	\$598 per Registrant for 5 or more people for any workshops in any city (Save 40%)

Total Amount to Charge My Credit Card: \$ _____



Select Card Type: ___ Visa ___ MasterCard ___ American Express ___ Discover

Print Full Name on Credit Card _____

Credit Card Number _____ ExpDate _____

Email of Cardholder _____

Card Security Code _____ Signature _____

Name of 2nd Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____

Name of 3rd Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____

Name of 4th Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____

Name of 5th Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____

Name of 6th Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____

Name of 7th Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____

Name of 8th Participant _____

Date of Workshop Participant Plans to Attend _____ City of Workshop _____

Title/Position _____

Email _____ Office Phone _____