

Putting Your Experience to Work
2009 Registration Form
1301 K Street, N.W. Washington, D.C.

Honorific: Dr. Mr. Ms. Miss Mrs.

Full Name: _____

Badge Name: _____

(First name for seminar badge)

Title: _____

Agency: _____

Office Address: _____

Phone: _____ Fax: _____

E-Mail: _____

Grade: SES SL or ST GS 14-15 Other (Specify): _____

Special needs: If you have any special needs pursuant to the Americans with Disabilities Act, please inform us of your specific needs in advance so we can accommodate you.

Seminar Date: Select 2009 Date For Which You Wish to Register

- September 22-23 October 20-21
 November 10-11 December 8-9

Registration Fee: Check and Initial

_____ Regular Registration: \$2000.00

Payment Method:

- Training form, check or money order is enclosed (Payable to "SEA PDL")
 AMEX VISA MasterCard Diners

Card # _____

Expiration Date/Authorization Code: _____

Signature: _____

- ♦ If you are paying by credit card, you may fax to: (202) 927-5192
- ♦ Or to submit a training form or pay by check, mail your registration form and payment to:

Senior Executives Association's Professional Development League
820 First Street N.E., Suite 700
Washington, D.C. 20002

Cancellation Refund Policy: SEA PDL will give refunds (less a \$75.00 processing charge) for cancellations made before close of business 12 business days prior to the seminar. Notification must be in written form - cancellations by telephone are unacceptable. No refunds will be granted for cancellations made after that date or for "no shows."

For further information or questions, please call (202)927-7000