

1 Hour Webinar Application

Max 5 Attendees

PLEASE PRINT

Name:		Title/Position:	
School/Organization:		Grade Level Responsibility:	
School District:			
School/Business Address:			
City:		State:	Zip:
Business Phone:		Business Fax:	Home Phone:
Email (required for workshop login information):			
<input type="checkbox"/> Kurzweil 3000 v11 <input type="checkbox"/> Classroom Suite v4 <input type="checkbox"/> Other (please specify):			
Workshop Topic:			
Requested Date: 1 st Choice:		2 nd Choice:	
Please allow at least 2 weeks lead time to schedule your workshop.			

Note: High-speed internet and a speaker phone are required for the workshop

WORKSHOP FEE PER HOUR: \$150.00

Please fax this form and Payment Information to: Cambium Learning Technologies - 781-276-0643

If you are paying by check, please fax the form and check to 781-276-0643 then mail both to:

Cambium Learning Technologies -Workshops
1223 Wilshire Blvd, Box 159
Santa Monica, CA 90403

Purchase Order: <i>Please fax copy payable to Cambium Learning Technologies</i>	Purchase Order Number:		
	Attention:		
	Invoice Ship-to Address:		
	City:	State	Zip:

Personal/Business Check: <i>Payable to Cambium Learning Technologies</i>	Check Number:		
	Attention:		
	Receipt Ship-to Address:		
	City:	State	Zip:

Credit Card: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA Please note: Your card will be charged by "Sopris West"	Account Number: (16 Digits)		
	Expiration Date: /	Amount to be Charged: \$	
	Cardholder's Name: (as it appears on card)		
	Cardholder's Signature:		
	Cardholder's Address:		
	City:	State	Zip:

RESCHEDULING POLICY: If you need to reschedule less than **1 week prior to the workshop**, you will be assessed a rescheduling fee of \$15.