

Peers Making Peace© Facilitator Training Registration Form

Training Location: _____

Training Dates: _____

Registration Fee:

\$850 per participant

Registration/Billing/Contact Information

| | | | |
|------------------------|-----|----------------|-------------|
| Name | | Position | |
| School/Organization | | | |
| Mailing Address | | City | TX Zip |
| Billing Contact Person | | Position/Title | |
| Phone | Fax | Email | |

Payment Method

Check Enclosed # _____

Purchase Order Enclosed # _____

Money Order # _____

Please make check or PO payable to *paxUnited* , and forward it with the registration form via mail to:

paxUnited
c/o Accounting
P.O. Box 702407
Dallas, TX 75370

For billing questions, contact accounting@paxunited.org

Purchase Orders may be faxed to: 972-671-9549

Questions? Contact Elizabeth Etier, Director of Training, at elizabeth.etier@paxunited.org or 972-671-9550.