

Registration Form

Name

Address

City

State

Zip

Cell Phone

E-mail Address

Degree, License & License Number

Lunch Preference:

Non-Vegetarian

Vegetarian

Cost - Conference fee includes 3 meals, all breaks, and 1.0 CEUs (10 contact hours), including 3 Ethics hours. CEUs for LCSWs, LMSWs, LPCs, and LMFTs.

	Early Registration Postmarked By 9/10/11	Late Registration Postmarked by 9/26/11
TSCSW Member	\$250	\$275
Non-Member	\$275	\$290
Students/Retiree	\$125	\$150

Amount Enclosed \$ _____

Make Checks Payable to TSCSW

Mail Registration to:

Betty Beck, LCSW

TSCSW Conference Registration

1978 Babcock Road

San Antonio, TX 78229