

➔ **PRINT THIS FORM AND FAX OR MAIL IT ALONG WITH PAYMENT TO WILSON LANGUAGE TRAINING**

PROGRAM	DATE	TIME	LOCATION	VENUE	TUITION
<input type="checkbox"/> Advanced Word Study (WRS Steps 7-12)	<i>Online coursework at www.wilsonlanguage.com/academy</i>				\$325
<input type="checkbox"/> WRS Steps 7-12 Practicum	<i>Prerequisite: Enrollment in or completion of Advanced Word Study (WRS Steps 7-12)</i>				\$325
<input type="checkbox"/> WRS Group Mastery Practicum	<i>Prerequisite: Enrollment in or completion of Advanced Strategies for MSL Instruction</i>				\$325
SUBTOTAL ➔					
Please add applicable state sales tax; exempt customers must provide an exemption certificate when placing an order.					SALES TAX ➔
(PAYABLE U.S. FUNDS ONLY TO WILSON LANGUAGE TRAINING)					TOTAL ➔

Registration is required before the event and is processed on a first-come, first-served basis. Total tuition is due at the time of registration. Please see website for cancellation policy. Materials are sold separately; use WLT Order Form. A confirmation letter will be sent with specific details. While we make every effort to conduct professional development events on the dates and locations advertised, they are subject to change without prior notice. WLT reserves the right to change or cancel a professional development event due to low enrollment or factors beyond our control. We will attempt to notify registrants to limit customer inconvenience but we are not liable for any expenses incurred.

Note: On occasion Wilson Language Training Corporation (WLT) receives inquiries as to whether an individual is certified in Wilson or has otherwise participated in Wilson Professional Development. Our policy is to not disclose personal information with regard to participants in our programs. WLT will, however, unless specifically requested in writing otherwise, share information regarding certification and the level of participation in our professional development programs.

A REGISTRANT INFORMATION CONTACT PREFERENCE: HOME WORK

PERSONAL

H NAME _____

H ADDRESS _____

H TOWN / CITY _____

H STATE / PROVINCE ZIP COUNTRY _____

H PHONE CELL _____

H EMAIL _____

WORK

W ORGANIZATION _____

W ADDRESS _____

W TOWN / CITY _____

W STATE / PROVINCE ZIP COUNTRY _____

W PHONE CELL _____

W EMAIL _____

B PREREQUISITE INFORMATION

REGISTRATION CANNOT BE PROCESSED WITHOUT THE FOLLOWING INFORMATION:

WILSON PROGRAM **WRS LEVEL I CERTIFICATION** _____

LOCATION _____

DATE(S) _____

TRAINER NAME _____

DEGREE IN EDUCATION OR RELATED FIELD (SPECIFY): _____

C BILLING ADDRESS SAME AS: PERSONAL WORK

B NAME _____

B ADDRESS _____

B TOWN / CITY _____

B STATE / PROVINCE ZIP COUNTRY _____

B PHONE CELL _____

B EMAIL _____

D PAYMENT METHOD

CHECK/MONEY ORDER • PAYABLE TO **WILSON LANGUAGE TRAINING CORPORATION**

CHECK # _____

CREDIT • WE ACCEPT **VISA, MASTERCARD, AMERICAN EXPRESS** AND **DISCOVER**

CREDIT CARD # _____

EXPIRATION DATE CVV2 #
(Credit Card Security Number) _____

PRINT CARDHOLDER'S NAME _____

SIGNATURE _____

PURCHASE ORDER • AUTHORIZED HARD COPY MUST BE ATTACHED

PURCHASE ORDER NUMBER _____

TAX EXEMPT NUMBER _____

APPLICABLE TAX WILL BE CHARGED UNLESS A CURRENT TAX EXEMPT CERTIFICATE IS ON FILE

E SUBMIT REGISTRATION WITH PAYMENT

DATE SUBMITTED ➔ _____

MAIL TO ➔ **ATTN: CUSTOMER SERVICE**
WILSON LANGUAGE TRAINING CORPORATION
47 OLD WEBSTER ROAD | OXFORD, MA 01540

OR FAX TO ➔ **508.368.2300**

FOR INTERNAL USE ONLY • DATE RECEIVED