



Professional Development Training



REGISTRATION FORM

Contact Name: _____ Company Name: _____

Mailing Address: _____ Suite: _____ City: _____ State: _____

Parish: _____ Zip: _____

Telephone: _____ Fax: _____ Cell: _____

E-Mail Address: _____ Web Address: _____

(Registration includes training materials, handouts, and meal)

WORKSHOPS

	JMD	USD
Two Day Workshop	\$35,100	\$300
Full Day Workshop	\$17,550	\$150
Half Day Workshop	\$11,700	\$100
Lunch 'n Learn	\$7,020	\$ 60

PROGRAMS

	JMD	USD
Emerging Leader Training	\$140,400	\$1,200
Supervisor Leadership Training	\$280,800	\$2,400
Manager Leadership Training	\$421,200	\$3,600
Executive Leadership Development	\$720,000	\$6,000
Purposeful Leadership Training	\$409,500	\$3,500

Payment by Credit Card: *(Check One)*     # Check

Card Number: _____ Expires: _____ PIN: _____

Signature (required): _____ Date: _____

Payment by Check or Money Order:

MAKE CHECKS or MONEY ORDERS PAYABLE TO:
Daniels Communications

SEND PAYMENTS and this completed form to:
Attn: Daniels Communications
562 Edinburgh Ave
Montego Bay, Jamaica
St. James

Contacts:

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