

# GKCPA Aspiring Principals Workshop Registration Form

Registrant's Name \_\_\_\_\_

School District \_\_\_\_\_

School Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Email** \_\_\_\_\_

**(Confirmation will be sent via email)**

**METHOD OF PAYMENT:**

Make checks payable and remit to: MoASSP  
Mail to: 2409 West Ash ST,  
Columbia, MO 65203-0045

**Fax: 573-445-6416**

Check No. \_\_\_\_\_

Purchase Order No. \_\_\_\_\_

**REGISTRATION FEE: \$75.00 per person**

**2/7/18**

**GKCPA**

**(1:00 pm – 4:45 pm)**

**Summit Technology Academy**

**1101 NW Innovation Parkway**

**Lee's Summit, MO 64086**

**For more information call: 573-445-5071**