



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	\$54,450	\$450
Full Day Workshop	\$27,225	\$225
Half Day Workshop	\$12,100	\$100
Lunch 'n Learn	\$7,260	\$ 60

PROGRAMS

	JMD	USD
Emerging Leader Training	\$43,375	\$ 375
Supervisor Leadership Training	\$54,450	\$ 450
Manager Leadership Training	\$63,525	\$ 525
Purposeful Leadership Training	\$423,500	\$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
PO Box #1 White Sands
Montego Bay, St. James

Contacts:

Program Coordinator - Registration & Scholarship info:
Ebuni Slacks - ebuni@dcg-training.com

Partnerships/Sponsorships - Jewel Daniels
jewel@dcg-training.com

Website: www.dcleadershiptraining.com
Phone: 876.631.7977