

**FLORIDA DEPARTMENT OF EDUCATION**

***HEALTH: THE ROAD TO SUCCESS***

**STATEWIDE COORDINATORS' MEETING**

**NOVEMBER 21 - 22, 2002 ♦ HILTON ORLANDO / ALTAMONTE SPRINGS ♦  
ORLANDO, FL**

**PARTICIPANT REGISTRATION FORM**

**FIRST  
NAME:**

**LAST  
NAME:**

**JOB TITLE:**

**EMPLOYER:**

**WORK ADDRESS:**  
(city, state, zip)

**PHONE:**

**FAX:**

**EMAIL:**

**PLEASE LET US KNOW IF YOU REQUIRE ANY SPECIAL ACCOMMODATIONS AT THE MEETING:**

**PLEASE RETURN BY NOVEMBER 1, 2002, TO:**

**DEPARTMENT OF EDUCATION  
COORDINATED SCHOOL HEALTH PROGRAM  
325 W. GAINES STREET - SUITE 501  
TALLAHASSEE, FL 32399-0400**

**ATTN: DEBRA BETTON**

**OR**

**FAX: (850) 488-9840 / SUNCOM FAX: 278-9840**