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Department of Education
Speech/Language Weekends with the Experts
January 11-12, 2003
Jacksonville, Florida

Name of School District: _____

Address: _____

Name of District Speech/Language Coordinator: _____

Phone Number: _____ Email: _____

Do not register more than the following number of participants per district for the workshop on January 11-12, 2003, in Jacksonville, Florida.

Number of participants:

8 per very-large size district

6 per large size district

4 per medium size district

2 per med-small size district

1 per small size district

Counties:

(Dade, Broward, Hillsborough, Palm Beach, Orange, Duval, Pinellas)

(Polk, Brevard, Volusia, Seminole, Lee, Pasco, Escambia)

(Marion, Manatee, Sarasota, Leon, Collier, Okaloosa, Osceola, Alachua, St. Lucie, Lake, Clay, Bay, Santa Rosa, St. Johns)

(Charlotte, Hernando, Martin, Citrus, Indian River, Putnam, Highlands, Nassau, Monroe, Columbia, Gadsden, Jackson, Hendry)

(Okeechobee, Levy, Flagler, Sumter, Walton, Suwannee, Hardee, Baker, DeSoto, Wakulla, Bradford, Taylor, Holmes, Madison, Washington, Gilchrist, Dixie, Union, Gulf, Calhoun, Hamilton, Jefferson, Franklin, Liberty, Glades, Lafayette)

Participant's Name	Phone Number
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

____ The district Speech/Language Coordinator will attend the January 11-12, 2003, Weekends with the Experts.

Name

If there is space available, I have additional therapists who would like to attend this workshop (please list on an additional sheet of paper).

Please mail or fax *no later than 11/18/02* to:
Sharon Alemar
CSPD Project, University of South Florida
140 7th Avenue South, SVB 108
St. Petersburg, FL 33701-5016
FAX 727-553-3180 Telephone 727-553-3182