




Fall 2011 Training Registration Form

Date & Times	Training Title	Cost /Credentialing Hours	
Thurs., Oct. 27	How Adults Learn: The Neuroscience of Adult Learning	\$45.00, 3 credit hours	<input type="checkbox"/>
Fri., Oct. 28	Mindfulness Practice In Trauma: Get Inside The First 1/5 of a Second	\$45.00, 3 credit hours	<input type="checkbox"/>
Tues. Nov.29	Bulling: STOP the "Imbalance of Power" Get Involved	\$30.00, 3 credit hours	<input type="checkbox"/>
Wed. Nov. 30	Time Manage Your Personal & Professional Life	\$30.00, 3 credit hours	<input type="checkbox"/>
Thurs, Dec. 1	The Examined Life: Ethics, Values and Professionalism	\$50.00, 5 credit hours	<input type="checkbox"/>
Thursdays 10:00 -11:30 am Sign in 9:45	Learning Thursdays Webinars Location: CASAC Jamestown Office	\$15.00 each 1.5 credit hours	

For Content Information go to www.casacweb.org

Oct. 10	Sexual Trauma in the Military	CASAC, (Sec. 2) CPP/CPS, (Sec. 1)	<input type="checkbox"/>
Oct. 20	Suicide Prevention for Veterans	CASAC, (Sec. 2) CPP/CPS, (Sec. 1)	<input type="checkbox"/>
Nov. 03	Veterans & Substance Abuse	CASAC, (Sec. 2) CPS/ CPP, (Sec. 1)	<input type="checkbox"/>
Nov. 17	Traumatic Brain Injury in Veterans	CASAC, (Sec. 2) CPP/CPS, (Sec. 1)	<input type="checkbox"/>
Dec. 1	TBI & Substance Abuse Sustained Recovery	CASAC (Sec. 2) CPS/ CPP (Sec. 1)	<input type="checkbox"/>
Dec. 15	Transformation of Outpatient Services	CASAC/CPS/ CPP (Sec. 1)	<input type="checkbox"/>
Dec. 29	Impaired Driver Service Update	Renewal Only	<input type="checkbox"/>

**The registration form can be completed and e-mailed
See page 2 for Registration Form ...**

**This registration form can be completed on-line
www.casacweb.org using PayPal; e-mailed to
kjcolby@casacweb.org, Faxed (716) 664-3661, or mailed to CASAC**

Payment Method:

_____ Check payable to CASAC or

_____ * Payment will be made through PayPal

* If paid through PayPal a 3% surcharge fee will apply.

Please add a 3% transaction fee to the registration fee.

Have you attended previous training events provided by the CASAC? __Yes __No

Name _____

Address _____

Employer _____

Job Title _____

Phone _____ Fax _____

E-mail _____ Amount enclosed \$ _____