



**2013 EEOC EXCEL Training Conference**  
**Private and State and Local Registration Form**  
**August 27- August 29, 2013**

(Send registration to: **EEOC Training Institute**, "Registration Processing Office", 6501 Red Hook Plaza, Suite 201, St. Thomas, VI 00802; FAX 703.787.8090)

**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_ **Last:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Organization:** \_\_\_\_\_ **SubOrg:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_ **Fax No. ( )** \_\_\_\_\_

**Business Telephone:** ( ) \_\_\_\_\_ ( if TTY, please check) **Email Address:** \_\_\_\_\_

Do you require a reasonable accommodation, due to a disability, in order for you to attend this program?

Yes Describe accommodation requested \_\_\_\_\_

**EXCEL Conference (Fee):**

**Regular:**

EXCEL Conference Only (\$1,245)

**Early Bird\* (With payment received by July 29, 2013)**

EXCEL Conference Only (\$1,145)

**Payment Information:**

**Credit Card**    MasterCard    Visa    American Express    Discover

**Account #** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Cardholder Name (please print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_ **Cardholder Email address:** \_\_\_\_\_

**Check Payment: (Send Payment and Registration Form)**

**State and Local Purchase Order**   Purchase Order No. \_\_\_\_\_  
Amount of PO \_\_\_\_\_ Tax Identification Number: \_\_\_\_\_

**HOW WILL FINAL PAYMENT BE MADE ON THIS PURCHASE ORDER?**

**Credit Card:**    MasterCard    Visa    American Express    Discover

Account # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Security Code \_\_\_\_\_ Cardholder Email address \_\_\_\_\_

**Check - Payable to EEOC Training Institute "Registration Processing Office"**

**Billing Organization/Address** \_\_\_\_\_

**Name, Email & Phone of Purchase Order Contact** \_\_\_\_\_

\_\_\_\_\_

## Select Your Private/State & Local Workshops:

### Select Your Workshops:

Workshop I:  E  F  G

Workshop IV:  E  F  G

Workshop II:  E  F

Workshop V:  E  F  G

Workshop III:  E  F  G

Workshop VI:  E  F  G

Have you attended an EEOC sponsored seminar, course or conference in the past 5 years?  Yes  No

#### Your Position Category:

- Attorney, Attorney Rep  Mediator, ADR  
 EEO Director, Manager, Supervisor  
 EEO Professional (Investigator, Counselor, Specialist)  
 HR Director, Manager, Supervisor  
 HR Professional/Staff  Other Manager, Supervisor  
 President, CEO, Owner  Union Representative  
 Other \_\_\_\_\_

#### How did you learn about our seminar?

- Brochure in mail  
 Colleague  SHRM  
 EEOC event  
 Email  Website/Internet  
 Professional Organization  Newspaper /Radio Ad  
 Other \_\_\_\_\_

### PLEASE FILL OUT A SEPARATE REGISTRATION FORM FOR EACH REGISTRANT.

**REGISTRATION:** There are three ways to submit your registration (and state and local purchase order information, as needed):

1. **Mail to:** EEOC Training Institute, "Registration Processing Office", 6501 Red Hook Plaza, Suite 201, St. Thomas, VI 00802
2. **Fax to: (703) 787-8090**
3. **Send a PDF** of your registration to: [eeoc.traininginstitute@eeoc.gov](mailto:eeoc.traininginstitute@eeoc.gov)

**PAYMENT:** Check payment and State and Local purchase orders are accepted. State and local government purchase order registrations must include the PO number, the name, email and telephone number of the billing point of contact (POC), the agency tax ID number and the billing address to send an invoice to. If any of these are missing, your registration cannot be confirmed. Only federal government purchase orders of over \$2,500 are accepted. Contact 1.866.446.0940 for a copy of a registration form and special registration procedures.

**REGISTRATION QUESTIONS:** If you have any questions about registration please call: 1-866-446-0940 (TTY 1-800-828-1120) or email us at [eeoc.traininginstitute@eeoc.gov](mailto:eeoc.traininginstitute@eeoc.gov). **Space is limited!** So please REGISTER EARLY, preferably two weeks prior to the conference. **On-line registration will close 2 days before the event.**

**CONFIRMATION:** Registrants will receive confirmation upon receipt of complete registration form and payment information. **If registrants do not receive an email confirmation**, call our customer service representatives at 866-446-0940 to verify that the registration has been processed and the individual(s) is/are confirmed for the event. **All Registrants should bring a copy of their confirmation letter along with their registration ticket to the conference.**

**REASONABLE ACCOMMODATION REQUESTS:** Please describe your accommodation needs due to a disability on the registration form and we will respond to you.

**HOTEL ARRANGEMENTS:** The conference hotel is the Sheraton Denver Downtown Hotel, 1550 Court Place. Denver, CO 80202, United States Phone: (303-893-3333). Registrants are responsible for their own hotel and travel arrangements. For your convenience please click on the link: <https://www.starwoodmeeting.com/Book/excel2013>

**CANCELLATIONS/NO-SHOW POLICY:** Cancellations received more than fourteen (14) calendar days prior to the conference are eligible for a refund, less a \$100 processing fee. If the cancellation is received less than 14 calendar days prior to the conference, the registrant will be responsible for the full conference fee. **No Shows are not eligible for a refund.** If a Registrant cannot attend, substitutions can be made prior to the beginning of the conference by contacting the EEOC Training Institute.