



**April 2024**  
**½ Day Seminar**  
**REGISTRATION FORM**

Company Name: \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Attendees: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Registration Fees:***

Attendee Type	Fee	Number of Attendees	Total
Member or Non-Member	\$100.00		\$
<b>Total Fees</b>			<b>\$</b>

To register, please send this form by email or mail and remit payment to:

***Tri County Human Resource Association***

P.O. Box 400

Platteville, WI 53818

*Please contact Danielle at 608-295-9241 with any questions or by email at [tricountyhra@gmail.com](mailto:tricountyhra@gmail.com).*