



**THE SHARING COMMUNITY INC.**

P.O. BOX 657, YONKERS, NEW YORK 10702

FOUNDED IN 1983 BY ST. PETERS ROMAN CATHOLIC CHURCH & ST. JOHN'S EPISCOPAL CHURCH

**Hazel & Hyde Educational Trainers**

**CASAC Re-Credentialing workshop registration form**

Name:
Address (Street Address, City, State, and Zip code):
Telephone #
Email address
Are you employed as a CASAC IF YES Employer Name _____ Employer Address _____ Employer City, stat zip code _____ Employer Phone number _____
Workshop Name _____  Date: and Time:  Location : _____
You may register for up to 3 sessions on this form.
Please check the appropriate Payment Method. All classes must be paid for on or before  <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card
Registration Cost: \$150 must be submitted with application  Bi weekly pmt after deposit \$237.78 or \$118.89 weekly  Cost for re-certification and exam prep are scheduled and reviewed by appointment

Mail/Email Registration form to: **The Sharing Community**

**PO Box 657, Yonkers New York 10701**

**Attn: Audrey Hyde, Director of Program Services**

**Make Checks Payable to: The Sharing Community, Inc.**

**Office use only**

Received payment on: \_\_\_\_\_

Payment Method: \_\_\_\_\_

Payment amount: \_\_\_\_\_