



I am registering for the following training sessions (select one):

- Session 1 - 9:30 am Preventing & Addressing Abuse and Neglect**
- Session 2 - 12:30 pm Sexuality & Intimacy For People With Disabilities**

- I will be attending for the entire day – both SESSION 1 AND SESSION 2
- I will be ONLY be attending SESSION 1 – Preventing Abuse and Neglect
 - Will you be staying for lunch following session 1 at 11:45? YES or NO
- I will be ONLY be attending SESSION 2 – Sexuality and Intimacy
 - Will you be joining us for lunch before session 2 at 11:45? YES or NO

Name (as it will appear on name badge): _____

Organization (if applicable): _____

Title (if applicable): _____

Address: _____

City: _____ State: _____ Zip Code: _____ County _____

Telephone: _____

Fax: _____ E-mail: _____

Please select all that apply:

- I am a person with a disability or other functional limitation
- I am a relative, friend, or personal attendant
- I am an employee of a service provider agency
- Other _____
Please provide the following special accommodations
- Training Materials (please circle one): Large Print Braille CD
- Dietary Restrictions: _____
- Other _____

Submit registration in one of the following ways:

Fax To: The Arc of West Virginia – 304-865-2072
Mail To: The Arc of West Virginia, 912 Market Street, Parkersburg, WV 26101
Scan and Email: registration@thearcofww.org
For more information contact Christina Smith at 304-422-3151