Montclair Interdisciplinary Child Study Group

Registration Form

Name

Street Address



To join the Montclair Interdisciplinary Child Study Group (August 15, 2019 – June 30, 2020), please complete the registration form below. This form must be printed, completed and mailed to: Professional Growth Seminars, LLC, c/o Laurie Kalb, 20 Lonergan Lane, West Orange, NJ 07052. Checks should be made out to PGS or Professional Growth Seminars, LLC. Credit card transactions will be from Paypal for \$135.

If you would like more information about membership, please contact Laurie at 747-221-6590 or pgsworkshops@gmail.com or specify your questions in the comment box below.

The annual membership fee is \$135.

City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
Professional Title:	
Specialty:	
Type of Practice	
Individual Group	Other (please explain):
Website:	
Details about your area of spe	ecialization:
Areas of interest for future stu	dy group topics:
Publications/products you wou	uld like highlighted to the group:
Please select one: Rene	ewalNew Member
(renewing members must upd	ate all)
Best contact phone number:	
If you would like to refer a coll	eague(s) to join the group, please provide name(s) and email(s):

כ	mments/Questions
г	ank you for completing this form and joining us!
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	If you are using a credit card, please fill in the fields below:
	Amount: \$135.00
	Type of Card (MC, Visa, Amex):
	Number:
	Expiration date:
	Security code:
	(For Visa/MasterCard/Discover, the security code is a 3-digit number printed on the signature panel on the back of the card. For American Express, it is a 4 digit number on the front of the card.)
	Zip code:
	Zip code:

Please write to pgsworkshops@gmail.com for acceptance before submitting.

You can add your name to the mailing list by submitting the "contact us" link on the website.