

## Pottstown SCORE Workshop Registration Form

Please print

Attendee Name(s): \_\_\_\_\_

Course Name: \_\_\_\_\_

Course Dates: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Office Phone: \_\_\_\_\_

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

The type of Business you are in or contemplating: \_\_\_\_\_

\_\_\_\_\_

What you want to learn from this workshop: \_\_\_\_\_

\_\_\_\_\_

Amount of Fee Enclosed: \_\_\_\_\_

Send a separate check or money order for each person payable to Pottstown SCORE.  
Fees are not refundable. Fees should be mailed at least one week prior to the course date  
to ensure space.

Mail this form and payment to: Pottstown SCORE  
244 High Street, Suite 102  
Pottstown, PA 19464