
KIDS FINANCIAL \$ENSE: A FINANCIAL LITERACY SYMPOSIUM

REGISTRATION FORM

FAX TO: 908.789.4237 no later than January 1, 2007

(A form is needed for each person registering - Duplicate as needed)

Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Day Phone: _____

Email contact: _____

Afterschool Program: _____

School: _____

Agency: _____

Cost: \$25 per person includes Continental breakfast and materials

Make checks payable to NJSACC.

PO's and Credit Cards accepted.

Amount enclosed: _____

Check Number _____ or Purchase Order Number _____

OR

Credit Card # _____

Visa ___ MasterCard ___ Expiration Date _____

Name on Card _____

Zip Code for Credit Card Billing Address _____

Mail payment and registration form to:

NJSACC

231 North Avenue West #363

Westfield, NJ 07090

Registrations may be faxed to 908-789-4237.

All Registrations must be received by January 1st, 2007.

Payment and or PO must be mailed to the address above and received by date of training.

Additional information:

Please give an estimate of the number of families served who work for:

___ IBM ___ J&J ___ Merck ___ AT&T ___ Dow Jones ___ Exxon Mobile ___ Novartis

Number of youth served: _____

NO WALK IN REGISTRATIONS, PLEASE!