West Slope Casa
Training Consortium
Certified Addictions Counselor Training Registration

Training:_____

Date of training:_____

Your Name:_____

Agency where you work:_____

Agency Address_____

Office Phone:_____ Fax: (***Required)***_____

E-mail (***Required***):_____

$ Due_____ check enclosed (mail to West Slope Casa, P O Box 3410, Glenwood Spgs, 81602)

Credit Card #_____ expires_____

Note: you MUST have an e-mail address for registration confirmations.
If you don't have an e-mail address, please use a supervisor's or co-worker's who can get the information to you.

**If you work for a West Slope Casa participating member agency, you may attend as many trainings as your agency allows for $100 a year. Years run July 1 to June 30. A check or credit card # should accompany your first registration. Participating agencies:

Colorado West Regional MHC
Midwestern Colorado MHC
Peaceful Spirit
Balance Counseling
Hilltop Community Resources
Cortez Addiction Recovery Svcs
Peer Assistance Services / WTASC
Southwest Colorado MHC
Valley View Youth Recovery Center

Please see the schedule for locations. Exact locations and directions will be provided with your registration confirmation **by e-mail** one to two weeks prior to the classes.

If you must cancel a reservation, please do so as early as possible so others may take your slot. Cancellations within two business days and no-shows will carry a $50 penalty, payable before more classes may be attended. ***Outside agency reservations for classes can only be made when the registration is accompanied by a check or credit card for the full class fee.***

Agreed:_____ Approved by:_____
Registrant Supervisor

Send registration to Kenna Clements, fax 970-723-4732. Registration questions? Call Kenna, 970-723-0055 or email her at training@westslopecasa.org. Thank you!