



**Student  
Leadership  
Services** INC.

# TRAINING/CONFERENCE REGISTRATION FORM

*Note: This form can be used for any SLS Training,  
Conference or Event Registration!*

Training/Conference Title: \_\_\_\_\_ Location: \_\_\_\_\_

Date of Event: \_\_\_\_\_ School Name \_\_\_\_\_

School Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

School Phone: \_\_\_\_\_  
(area code)

School Fax: \_\_\_\_\_  
(area code)

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

Website: \_\_\_\_\_

**Student Participants:** (Please use extra paper if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Students Address & Home Phone:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Photographs and videos will be taken during this conference for public relation. May we use your groups/students photo? Yes No*

**Advisor Participants:**

\_\_\_\_\_  
\_\_\_\_\_

**Address & Home Phone:**

\_\_\_\_\_  
\_\_\_\_\_

**Method of Payment:**

\$100 non- refundable deposit required (applied to costs)

- Full Payment Enclosed  
 Deposit Only Enclosed  
  
 Check  
 Purchase Order # \_\_\_\_\_

**CANCELLATION POLICY**  
Student Leadership Services, Inc. requires a forty-eight (48) hour notice to cancel individual or group registration for a training, conference or event. No refunds or credits will be given without 48-hour notice.

Registration Cost: \_\_\_\_\_

Registered Number of Participants: \_\_\_\_\_

Total Cost: \_\_\_\_\_

Full Payment or Deposit Only: \_\_\_\_\_

Balance Due: \_\_\_\_\_

## TO REGISTER

**Phone:** (248) 706-0757  
**Fax:** (248) 706-0750

**Mail:**  
Student Leadership Services, Inc.  
5195 Pontiac Lake Rd.  
Waterford, MI 48327

**Email:**  
dmf@slstoday.org  
pgvp@slstoday.org

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