

## Registration Form

### TRAINING IN THE NEEDS OF CHILDREN WITH AUTISM

**This registration form is to be used if you will be attending a workshop outside your current district**

The Cody Center is an NYSED approved provider of this required training for special education teachers and administrators. Certifications of Completion will be provided to all registrants successfully completing the three hour course. There is a \$45.00 cost per person.

Name \_\_\_\_\_

Profession \_\_\_\_\_ School District/Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ FAX \_\_\_\_\_ \*Email \_\_\_\_\_

Date of Training \_\_\_\_\_

Location of training \_\_\_\_\_

Time \_\_\_\_\_

Space is limited; please register early as seats are offered on a first come basis.

#### **Payment Method:**

Please send check or money order for \$45.00 per person made out to:

*Stony Brook Children's Services, U.F. P.C.*

Registration forms and payment may be faxed, emailed or sent via US mail:

Email: *Lynne.Barnett@stonybrookmedicine.edu*

Fax: (631) 632-3120

Mailing Address: The Cody Center, Putnam Hall Room 177, Stony Brook, NY 11794-8788

**\*You will receive confirmation that you are registered for the course via email.**

Contact Lynne Barnett for further information at (631) 632-8983