



Registration Form

**Texas Home School Coalition
CLE Seminar
Friday, December 11, 2009**

Acceptance of free registration confirms agreement to handle one pro bono CPS case.

Name _____

Bar Card # _____

Firm/Company _____

Address _____

City _____ State _____ Zip Code _____

Phone ____ (____) _____

Fax ____ (____) _____

*E-mail _____

My signature below confirms that I am not employed in any capacity by any government agency to handle CPS cases and that I will not share any information gained at this seminar with such persons.

Signature

**Fax or mail registration to
THSC by December 4.**

***Confirmation of registration will be e-mailed.**

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