

## Energy Programs Training Registration Form

Please complete this registration form to notify the Division how many individuals from your county will be attending each site. Please provide one designated contact person. Email the completed registration form to [Joan.Otto@dhhs.nc.gov](mailto:Joan.Otto@dhhs.nc.gov) or fax to (919) 334-1266 no later than **Tuesday, August 16, 2011.**

The Division will contact the county's designee if there is a scheduling conflict.

**County Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Date	Location	Number of Staff Attending
September 7	Jackson County DSS	
September 8	McDowell Technical Community College	
September 9	Caldwell County DSS	
September 12	Orange County DSS	
September 13	Union County DSS	
September 14	Behavioral Health Plaza	
September 26	Nash County DSS	
September 27	Robeson County DSS	
September 28	James Sprunt Community College	
September 29	Beaufort County Community College	