

REGISTRATION FORM

Arkansas Coroners Continuing Education Conference

S U I D I

June 15, 2017 - 12:00 Noon – 5:00 p.m.

June 16, 2017 – 8:00 a.m. - Noon

COURSE LIMITED TO 30 PARTICIPANTS

DEADLINE TO REGISTER: JUNE 1, 2017

Name (as it should appear on official records): _____

Title: _____ County: _____

Office Mailing Address: _____

Telephone: _____ Fax: _____

Email: _____

Years in office: _____

Signature: _____

Please fax registration form to Karan Skarda at 501-372-0611

or

Email to: kskarda@arcounties.org

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Expenses to be paid from Arkansas County Coroners Continuing Education Fund. For questions concerning reimbursement, please contact Melanie Jenkins, Auditor of State's Office, at 501-682-5474.

Mileage:	One private vehicle per county @ .42 per mile
Guestroom rates:	June 15, \$94.00 single* \$10 each additional guest + tax plus tax
Breakfast:	Included in room rate
Dinner:	June 15, Reimburse up to \$25.00 with receipt
Breaks:	As required, direct bill
Audio Visual:	As required, direct bill
Parking:	As required, direct bill
Speaker:	As required, direct bill
Incidentals:	As required, direct bill