I-ACT REGIONAL MEETING Mid West MAKE PLANS NOW TO ATTEND! IF YOU MISSED THE CONVENTION, DON'T MISS THE REGIONAL

SUNDAY

May 7, 2017 (12:00 PM - 4:00 PM)

From Scratch Wellness

210 South 5th St., Unit 202

St. Charles, IL 60174

Jennifer Stanley, Hostess





IL

Mid West Regional Reps:

Grace Melby -815-648-4544 ghmelby@gmail.com or Jenniger Stanley - 630-945-3867



KS

* Get your 1-ACT Certifications.

* If you are testing, please contact
Grace, so she can verify that you are
eligible for testing.

MO



Available

See You There!



Mid-West Regional Registration Form

Regional Registration Form Please Print Clearly Registrant's Name: Mailing Address: _____ City: _____ State: ____ Zip: ____ Name of Business: Business Address: _____ Office Phone: ______ Home Phone: _____ Cell Phone: Email: Cost to attend Regional Meeting: I-ACT Member \$55.00 **Please check I will be presenting for: Level 1 Presentation Level 2 Presentation Instructor Presentation **Please Note: If you are planning on presenting you must contact the I-ACT Office and your Regional Representative at least one week before the meeting to ensure you have time allotted on the agenda for your presentation. ** I will be testing for the I-ACT Certification: SEE BOXES BELOW (\$75.00 fee for each test) Level 1 Foundation Level 2 Intermediate Level 3 Advanced Please mail this registration form along with all of your fees to the I-ACT Home Office (address below) Paid by: _____ Check#____ Credit Card ____ Money Order Cash If paying by credit card please fill out the following: Credit Card Number Name on Card Expire Date Signature: CVV# Please bring the required items listed below for your I-ACT Certification Testing. Level 1 Foundation: Level 2 Intermediate Level 3 Advanced Instructor Member Member ____ Member Member HS Diploma or HS Diploma or HS Diploma or HS Diploma or Equivalent _____ Equivalent Equivalent Equivalent A&P _____ 15 min Presentation A&P _____ A&P _____ CPR _____ CPR ____ CPR ____ Advanced Level Cert. _____ 1 Year @ Level 2 30 min Presentation 6 Mos. @ Level 1 I-ACT Instructor Class Payment ____ Payment ____ Payment _____ Payment _____