



REGISTRATION FORM

Behavioral Healthcare and Medical Tx for Trans and Gender Expansive Adults

date Friday, June 12, 2020 **contact hours** 2.75
time 9:00 am – 12:00 pm **fee** \$25
location Husson University | 340 County Road, Westbrook, ME 04092
register online <http://ccsme.org/events/>

Registrations will be processed only if accompanied by a check or purchase order.

name and designation _____

organization _____

address _____

city, state, zip _____ - _____ - _____

phone _____ - _____ - _____ X. _____

email _____

payment method enclosed check (payable to CCSME)
 purchase order # _____

→ REMEMBER: Your registration will not be processed without either payment or purchase order number. **Mail this form to CCSME with a check, or fax a copy of your purchase order to:**

94 Auburn Street, Suite 110 | Portland, Maine 04103
Tel: 207-878-6170 | Fax: 207-878-6172 | ccsme@ccsme.org

94 Auburn Street, Suite 110 | Portland, Maine 04103
Tel: 207-878-6170 | Fax: 207-878-6172
ccsme@ccsme.org | www.ccsme.org