



Registration Form

Date of the Workshop you will be attending: _____

*The Speaker's Connection
Donna J. Arnett, M.S.C., CCC
Facilitator & Coach
Telephone: 850-932-0016
Email: donna@powerofspeaking.com
Website: www.powerofspeaking.com*

Name: _____ Home Telephone: _____

Address: _____

Email: _____

Business: _____

Business Address: _____

Business Phone: _____ Fax Number: _____

Business email: _____

RSVP Confirm your reservation by either method:

Mail to: The Speaker's Connection
1004 Panferio Drive
Pensacola Beach, Florida 32561

Telephone: 850.932.0016

Method of Payment

_____ Check, payable to The Speaker's Connection
1004 Panferio Drive, Pensacola Beach, FL 32561

_____ Credit Card: Visa _____ Mastercard _____ American Express _____

Card Number: _____ Exp. Date: _____

Address if different from above: _____

Name on Credit Card: _____

I authorize payment to The Speaker's Connection.

Signature: _____ Amount charged: _____

100% Satisfaction or a full refund. All credit card transactions are deemed final upon completion of service.