

Teen Dating Violence Conference Registration Form

Name (PRINT): _____ **Position/Grade** _____

School/Organization: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **E-mail address:** _____

NOTE: This is a FREE two-day conference. The first day is for all service providers, parents, and teachers. The second day is for teens only. The first 100 teen registrants will receive a \$25 stipend for attending the conference.

- Are you interested in receiving community service hours for attending the conference?

____ Yes ____ No

- *How did you find out about the conference?* _____

Please fax to (202) 387-3812
or mail to: Teen Dating Violence Conference
DC Rape Crisis Center, P.O. Box 34125
Washington D.C. 20043

For questions, please call (202) 232-0789 ext.6007