

TEXAS MUNICIPAL COURTS EDUCATION CENTER

FY12 REGISTRATION FORM:

Juvenile Case Manager Seminar

May 16 - 18, 2012 Omni Southpark Austin

Conference Date: \_\_\_\_\_

Conference Site: \_\_\_\_\_

Check one:

- Juvenile Case Manager (\$50)
 Judge (\$50)

- Teen Court Coordinator (\$50)
 Clerk/Court Administrator (\$50)

Name (please print legibly): Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_
Names you prefer to be called (if different): \_\_\_\_\_ Female/Male: \_\_\_\_\_
Position held: \_\_\_\_\_
Date appointed/Hired/Elected: \_\_\_\_\_ Years experience: \_\_\_\_\_
Emergency contact: \_\_\_\_\_

HOUSING INFORMATION - Note: \$50 a night single room fee

TMCEC will make all hotel reservations from the information you provide on this form. TMCEC will pay for a double occupancy room at the the Juvenile Case Manager Seminar: To share with a specific seminar participant, you must indicate that person's name on this form.

- I request a private, single-occupancy room (\$50 per night : \_\_\_\_ # of nights x \$50 = \$\_\_\_\_\_)
 I request a room shared with a seminar participant. Room will have 2 double beds. TMCEC will assign roommate or you may request roommate by entering seminar participant's name here: \_\_\_\_\_
 I request a private double-occupancy room, but I'll be sharing with a non-participating guest. I will pay additional cost (\$50 per night : \_\_\_\_ # of nights x \$50 = \$\_\_\_\_\_) . I will require:  1 king bed  2 double beds
 I do not need a room at the seminar.

Hotel Arrival Date (this must be filled out in order to reserve a room): \_\_\_\_\_  Smoker  Non-Smoker

Municipal Court of: \_\_\_\_\_ Email Address: \_\_\_\_\_
Court Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_
Office Telephone #: \_\_\_\_\_ Court #: \_\_\_\_\_ Fax: \_\_\_\_\_
Primary City Served: \_\_\_\_\_ Other Cities Served: \_\_\_\_\_

STATUS (Check all that apply):

- Full Time  Part Time  Attorney  Non-Attorney  Juvenile Case Manager  Other \_\_\_\_\_
 Presiding Judge  Court Administrator  Justice of the Peace
 Associate/Alternate Judge  Court Clerk/Deputy Clerk  Mayor (ex officio Judge)

I certify that I am currently serving as a municipal judge or court support personnel in the State of Texas. I agree that I will be responsible for any costs incurred if I do not cancel at least 10 business days prior to the conference. I agree that if I do not cancel at least 10 business days prior to the event that I am not eligible for a refund of the registration fee. I will first try to cancel by calling the TMCEC office in Austin. If I must cancel on the day before or day of the seminar due to an emergency, I will call the TMCEC registration desk at the conference site IF I have been unable to reach a staff member at the TMCEC office in Austin. If I do not attend the program, TMCEC reserves the right to invoice me or my city for meal expenses, course materials and, if applicable, housing (\$85 or more plus tax per night). I understand that I will be responsible for the housing expense if I do not cancel or use my room. If I have requested a room, I certify that I work at least 30 miles from the conference site. Payment is due with the registration form. Registration shall be confirmed only upon receipt of registration form and payment.

Participant Signature (May only be signed by participant)

Date

PAYMENT INFORMATION: Payment will not be processed until all pertinent information on this form is complete.

Amount Enclosed: \$ \_\_\_\_\_ Registration/CLE Fee + \$ \_\_\_\_\_ Housing Fee = \$ \_\_\_\_\_

- Check Enclosed (Make checks payable to TMCEC.)
 Credit Card

Credit Card Payment:

Credit Card type: \_\_\_\_\_ Amount to Charge: \_\_\_\_\_ Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_
 MasterCard \$ \_\_\_\_\_
 Visa Name as it appears on card (print clearly): \_\_\_\_\_
Authorized signature: \_\_\_\_\_

Please return completed form with payment to TMCEC at 1609 Shoal Creek Blvd., Suite 302, Austin, TX 78701, or fax to 512.435.6118.