



82nd Annual WSSA Conference & Training Institute

June 6 & 7, 2019

**Chula Vista Resort
Wisconsin Dells, WI**

PERSONAL INFORMATION: *(Please print legibly)*

Name: _____ County: _____

Title: _____ Phone: _____

Agency Name: _____

Mailing Address: _____ Home
 Work

City: _____ State: _____ Zip Code: _____

E-mail address: _____

Is this your first conference? Yes No

SESSION CHOICE INFORMATION:

Please circle your session preferences below. The workshop descriptions are in the conference booklet. Although we prefer that you attend the sessions you have chosen, you may change your choice at the time of conference.

Choose one (1) for each time frame:

| | | | | | | |
|--------------------------|-------------------|---|---|---|---|---|
| Thursday, June 6, 2019 - | 1:00 - 2:30 p.m. | A | B | C | D | E |
| | 2:45 - 4:15 p.m. | F | G | H | I | J |
| Friday, June 7, 2019 - | 8:00- 9:30 a.m. | K | L | M | N | O |
| | 9:45 - 11:15 a.m. | P | Q | R | S | T |
| | 11:30- 1:00 p.m. | U | V | W | X | |

**Ethics & Boundaries Part 1 & 2 = 4 hours from 8:00-12:30 p.m. (including breaks)*



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REGISTRATION INFORMATION:

HONORARY LIFE MEMBERS—Free Registration

- _____ Full Conference Registration.....\$ 175.00
- _____ Full-Time Student (*6 credits or more*) Full Conference Registration..\$ 125.00
- _____ One-Day Attendance.....\$ 125.00
 - Thursday, June 6, 2019 -OR- Friday, June 7, 2019
- _____ Full-Time Student (*6 credits or more*)—One-Day Attendance.....\$ 75.00
 - Thursday, June 6, 2019 -OR- Friday, June 7, 2019

MEAL INFORMATION:

- _____ Full Meal Package (check preferences below).....\$ 28.00
- _____ Past Presidents' Luncheon—Thursday, June 6\$ 10.00
 - Cobb Salad Turkey Wrap Roast Beef on Artisan
- _____ Breakfast Buffet —Friday, June 7\$ 8.00
- _____ Awards Luncheon—Friday, June 7.....\$ 10.00
 - Roasted Sirloin Chicken Viennese Vegetable Stir Fry

If you have special dietary needs, please list: _____

Total Registration & Meals: \$ _____

- Please Bill Me** **PO # _____** **Check Enclosed**

Complete ONE registration form for each person who will be attending the Training Institute. Mail or scan the completed form(s) **by May 24, 2019** to:

Nina Jones
Kenosha County Job Center/Goodwill Industries
8600 Sheridan Road
Kenosha, WI 53143

e-mail:nina.jones@kenoshacounty.org
Phone:(262) 697-4657
Fax: (262) 697-4563

*Payments or PO's should be made payable to Wisconsin Social Services Association (WSSA)
Requests for conference refunds must be in writing and received no later than May 30, 2019 (substitutions accepted)*