1Touch Project

Email: [info@1touchproject.com](mailto:info@1touchproject.com)

Website: [www.1touchproject.com](http://www.1touchproject.com)

**Pre-Registration**

**Deadline: September 4th, 2014**

**Coaching Certification Course**

**When: October 23rd, 24th: 9:00am-5:00pm**

**October 25th: 9:00am-1:00pm**

**Where: Virginia Rehabilitation Center for the B/VI (VRCBVI)**

**401 Azalea Avenue,**

**Richmond, VA 23227.**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_

Preferred format (email, print,, large print, braille, or audio)\_\_\_\_\_\_

Requesting ACVREP CE hours in the amount of 16.75? ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation/Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that apply

\_\_\_\_\_Sighted

\_\_\_\_\_Deaf

\_\_\_\_\_Blind

\_\_\_\_\_Deaf/Blind

\_\_\_\_\_Other, Please Explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any secondary conditions/prosthetics?

A non-refundable deposit in the amount of $300 (per person) is required to secure your spot in the course. The remaining $300 (per person) is due on the first day of training.

Please make checks payable to 1Touch.

Mail registration form and pre-registration fee to

1Touch Project

418 Leffler,

West Burlington, IA 52655

Direct any questions to [info@1touchproject.com](mailto:info@1touchproject.com) or 319-759-8980