

Workshop Registration



Please Complete Information Below

Workshop Date:		Workshop Location:	
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First Name:		Last Name:	
Agency:		Email Address:	
Mail Address:			
Work Phone Number:		Cellphone Number:	
Supervisor Name:		Supervisor Number	
Supervisor Email Address:			

Comments

Photographs may be taken for promotional and training purposes. Please notify us during registration if you do not wish to be photographed.

*Please send completed registration form to:
Regina Hackett at regina.hackett@uconn.edu
For questions concerning registration, call (860) 486-6753*

*Connecticut Transportation Safety Research Center
270 Middle Turnpike
Storrs, CT 06269*