



Blink 2011 *student* workshop registration form

Name: _____

Position/Title: _____

School: _____

School address: _____

E-mail: _____

Contact phone #: _____

Attended a Blink workshop before? _____

Please indicate the workshop(s) you would like to schedule:

_____ **A: More Than A Pizza Lunch**
Date & location TBD
Preferred dates? _____

_____ **B: Facilitating for Social Justice**
Date & location TBD
Preferred dates? _____

Fee: \$1000/workshop or \$1800/both—to be paid when workshops are scheduled and confirmed.

Note: Workshops are limited to 30 participants. Have a larger group?
Please indicate the # of participants you would like to accommodate: _____

Please fill out, and return to:
Blink Consulting
945 Greenhill Rd.
Mill Valley, CA 94941