2017 Departmental Program Participant Registration Form William W. Winpisinger Education and Technology Center

EAP 4 October 29, 2017 through November 3, 2017

Participants should be prepared to travel and arrive on Saturday, October 28, 2017 if travel is by commercial airlines. All participants must be at the Winpisinger Center no later than 12:00 PM on Sunday, October 29, 2017.

Mandatory - The following information must be filled in

6. () () () () () () () () () ("Pull out your Driver's License."

Full Legal Name (as printed on your ID)

Verify your name is as it appears on your Driver's License or Passport that you are presenting as identification at the airport.

First Name:	Middle:	·	
Last Name:			
	Date of Birth		
Title:	_ Local Lodge:	District Lodge:	
Gender:	Territory:		
Mailing Address:	Duo, do o o /		
City:	Province/	Postal Code/ Zip Code:	
Home Phone:	Work Phone:		
Cell Number:	Fax Number: _		
E-Mail Address:			
Last 4 digits of SSN/SIN: _	IAM Boo	ok No.:	
Employer:			

RETURN THIS FORM TO:

Edward Manhart

Director of the Retirees & Employee Assistance Program Department 9000 Machinists Place Upper Marlboro, MD 20772

Phone: (301) 967-4717 Fax: (301) 967-3427 Via Anna Georgallas's email at: ageorgallas@iamaw.org

Return Form No Later Than: August 27, 2017

Attendance to this class must be approved by an authorizing lodge officer.

Please be advised that this form must be completed in its entirety.

THE BACK SIDE OF THIS FORM MUST ALSO BE COMPLETED

PARTICIPANT NAME:	

Attendance to this class must be approved by an authorizing lodge officer.

APPROVED BY:	
Name (please print)	
Title	Local Lodge or District Lodge
S	ignature
Daytime Phone	Extension #
Address	City
State Zip Code	E-Mail
General Vice President	
Directing Business Represer Or	tative
•	·
How Will Participant Travel?	
Via public trans	portation arranged and paid for by the Grand Lodge
Provide own tra	insportation
Flying on pass	but will need bus transportation
Edward Retirees 9000 Ma Upper N (301) 96 Fax: (30	Manhart, Director & Employee Assistance Program Department schinists Place larlboro, MD 20772 7-4717 1) 967-3427 Georgallas's email at: ageorgallas@iamaw.org

Return Form No Later Than: August 27, 2017