



NELI Evaluation Academy

REGISTRATION FORM

Registrant Information

*If Registering More than One Person, Please Submit Separate Form for Each Registrant

Attendee: _____ Position: _____

E-mail: _____ Phone: _____ Fax: _____

District/Co-op: _____ Region: _____

School (if applicable): _____

Mailing Address: _____

Billing Address (if different): _____

Item#	Webinar Description	Cost Per Attendee	# Attendees	Extended Cost
EA1	NELI Evaluation Academy Segment I: Other Health Impairment (OHI)	\$60.00		
EA2	NELI Evaluation Academy Segment II: Intellectual Disability	\$60.00		
EA3	NELI Evaluation Academy Segment III: Low Incidence	\$60.00		
EA4	NELI Evaluation Academy Segment IV: Child Find	\$60.00		
EA5	NELI Evaluation Academy Segment V: Autism	\$60.00		
EA6	NELI Evaluation Academy Segment VI: Emotional Disturbance	\$60.00		
EA7	NELI Evaluation Academy Segment VII: Specific Learning Disability	\$60.00		
EA8	NELI Evaluation Academy: Complete Series (Save \$70.00 off Individual Segment Cost)	\$350.00		
			Sub Total	
			Order Total	

Payment

- ☐ Check (Please mail with form if paying via check)
- ☐ Purchase Order # _____
- ☐ Invoice Me (Attn: _____)
- ☐ Credit Card: Please Call NELI at 512-732-2988

*If you are paying via Purchase Order, a copy of the Purchase Order must be attached with the order submission form.

Four Ways to Register

TEDA22

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Phone: (512) 732-2988

Fax: (512) 322-9342

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