

**Black River Technical College  
Corporate & Community Education  
Registration Form**

Please Print, Complete and Return This Form  
Mail to P.O. Box 468, Pocahontas, AR 72455, Fax to (870) 248-4096  
Call (870) 248-4180 if you have any further questions.

Date: **September 12, 2014**

○ **No Charge**

Course / Seminar Title: **Family History Workshop for Project REACH**

Instructor: **Cindy Robinett**

**Please list the family from which you descend? Rice, Upshaw, Looney, Downey,**

**or Other:** \_\_\_\_\_

**List which line (father or mother) and their names:** \_\_\_\_\_

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**Please list their parents (your grandparents) names, if known. This will help me in preparing the workshops.**

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<p><b>Name (print):</b> _____</p> <p><b>Address:</b> _____</p> <p><b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____</p>
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**S.S. # XXX-XX-** \_\_\_\_\_ **Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Sex:** F M

**Telephone:** Home \_\_\_\_\_ **Work** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

List any other classes / seminar topics you might be interested in attending (any subject):

1. \_\_\_\_\_ 2. \_\_\_\_\_

**How did you hear about this class? \_Newspaper \_Flyer \_Website \_Moodle \_Radio \_Other**

**Affirmative Action Statement:**

In keeping with guidelines on Title VI, Section 601, Civil Rights Act of 1964; Title IX, Section 901, Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, this school assures that no person in the United States shall, on the basis of race, color, national origin, sex or handicap be excluded from the participation in, be denied the benefit of, or be subjected to discrimination under any program or activity administered by the school. COMPLIANCE COORDINATOR: Black River Technical College, P.O. Box 468, Pocahontas, AR 72455, 870-248-4000.

**ADA Accommodations:**

Black River Technical College seeks to be in compliance with both the spirit and the letter of the law as stated in Section 504 of the Rehabilitation Act, as amended, and the Americans with Disabilities Act. Students seeking ADA accommodations must contact Bridget Guess, Director of Disability Support Services, P.O. Box 468, Pocahontas, AR 72455. Phone 870-248-4000 ext. 4014 or Fax 870-248-4100 or e-mail bridget.guess@blackrivertech.org. Contact must be made two weeks prior to beginning date of each enrollment period.