REGISTRATION FORM 2014-2015 MUNICIPAL JUDGE SPECIAL TOPIC SEMINAR

Please register me for the Municipal Judge Special Topic Seminar to be held March 19 & 20, at the Sheraton Milwaukee Brookfield.

Please send me confirmation materials.

Name:	Municipality:
Phone/Email:	
WISCONSIN MUNICIPAL JUD	GES ASSOCIATION LUNCHEON
_	meeting on Thursday, March 19 . Please indicate below any special dietary requests. Cost of this lunch will be \$5 per
Yes I will attend the	luncheonNo I will not attend
FRIDAY LUNCHEON RESERVA	ATION
like us to order one for you. You	will provide lunch on Friday. Please indicate below if you would will not have time to eat on your own until after the seminar. In to receive all four judicial education credits.
Yes I will be present	t for lunchNo I will not need lunch
•	needs regarding meeting facility and program access, ate specific needs and requests for assistance
Return by March 2 th to:	Office of Judicial Education 110 East Main St., Suite 200 Madison, Wisconsin 53703 or fax to 608-261-6650
	email to carol.koschel@wicourts.gov

Please use the space below to submit any questions or issues you would like addressed during the seminar. Please write legibly and indicate at which session(s) you would your question answered:						