

EDUCATIONAL CONCEPTS ETHICS SEMINAR / WEBINAR SCHEDULE

EDUCATIONAL CONCEPTS UNLIMITED, INC. 3301 W. MAIN, BELLEVILLE, IL 62226 Ph#: 618-233-1228 OFFICE / 618-233-1295 FAX

3 HR Seminar: \$48.50 if paying in advance, \$55.50 day of seminar

3 HR Webinar: \$34.50

1 HR Sexual Harassment Prevention Training Webinar: \$20

Dates and locations subject to change!

SELECT DATE, FILL OUT BOTTOM HALF OF FORM AND EITHER FAX, EMAIL OR MAIL TO US WITH PAYMENT

DATE	LOCATION	ADDRESS	CITY	TIME	SELECT DATE
11/17/2020	WEBINAR	ONLINE		6:00 P.M.	
11/18/2020	1 HR SEXUAL H. PREVENTION	ONLINE		4:00 P.M.	
11/23/2020	WEBINAR	ONLINE		9:00 A.M.	
11/24/2020	1 HR SEXUAL H. PREVENTION	ONLINE		1:00 P.M.	
11/30/2020	1 HR SEXUAL H. PREVENTION	ONLINE		9:00 A.M.	
12/02/2020	WEBINAR	ONLINE		1:00 P.M.	
12/08/2020	1 HR SEXUAL H. PREVENTION	ONLINE		11:00 A.M.	
12/08/2020	WEBINAR	ONLINE		6:00 P.M.	
12/16/2020	EDUCATIONAL CONCEPTS	3301 W. MAIN	BELLEVILLE	9:00 A.M.	
12/16/2020	1 HR SEXUAL H. PREVENTION	ONLINE		4:00 P.M.	
12/21/2020	WEBINAR	ONLINE		9:00 A.M.	
12/21/2020	1 HR SEXUAL H. PREVENTION	ONLINE		1:00 P.M.	
12/28/2020	WEBINAR	ONLINE		9:00 A.M.	
12/28/2020	1 HR SEXUAL H. PREVENTION	ONLINE		1:00 P.M.	
01/06/2021	EDUCATIONAL CONCEPTS	3301 W. MAIN	BELLEVILLE	9:00 A.M.	
01/06/2021	1 HR SEXUAL H. PREVENTION	ONLINE		3:00 P.M.	
01/13/2021	WEBINAR	ONLINE		1:00 P.M.	
01/14/2021	1 HR SEXUAL H. PREVENTION	ONLINE		9:00 A.M.	
01/19/2021	1 HR SEXUAL H. PREVENTION	ONLINE		11:00 A.M.	
01/19/2021	WEBINAR	ONLINE		6:00 P.M.	
01/25/2021	WEBINAR	ONLINE		9:00 A.M.	
01/25/2021	1 HR SEXUAL H. PREVENTION	ONLINE		1:00 P.M.	
02/02/2021	1 HR SEXUAL H. PREVENTION	ONLINE		10:00 A.M.	
02/03/2021	EDUCATIONAL CONCEPTS	3301 W. MAIN		9:00 A.M.	
02/09/2021	WEBINAR	ONLINE		6:00 P.M.	
02/10/2021	1 HR SEXUAL H. PREVENTION	ONLINE		3:00 P.M.	

Name _____ License/NPN: _____ Daytime Ph: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Circle Method of Pymt: Visa / Mastercard / Discover / America Express

Name on card (if different from above): _____

Billing Address _____ City: _____ State: _____ Zip: _____

Credit Card #: _____ Exp. _____ Sec. Code: _____

Signature: _____