

**2020 Disability Services Day at the Capitol**

*Sponsored by MOHR and ARRM*

**Registration Form**

\*Please fill out and return this form to Cody Holliday at [cholliday@fredlaw.com](mailto:cholliday@fredlaw.com) by Friday, February 14th.

Agency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Contact Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Contact Phone Number (Please provide a number you can be reached at on Tuesday, March 10th)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate number of attendees\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate if you would like MOHR to set up legislator appointments for you or if you will not be meeting with your legislators

(PLEASE DO NOT SET UP YOUR OWN APPOINTMENTS):

Please set up our appointments\_\_\_\_\_\_\_\_ No Meeting \_\_\_\_\_\_\_

Attendees (IF you would like MOHR to set up legislator appointments for you, please provide the names and addresses of those attending legislative meetings.)

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| **Name** | **Street Address, City, Zip** |
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