

# Registration Form: Yamhill County 2<sup>nd</sup> Annual DV SUMMIT

OCTOBER 21, 2011 · 8a.m. -5p.m.

PRINT/TYPE CLEARLY: 1 attendee per form

NAME: Last First Middle Initial

Title Agency

MAILING ADDRESS CITY STATE ZIP

BUS. PHONE FAX EMAIL

**DISCIPLINE:**

☐ PROSECUTOR ☐ NURSING ☐ ADVOCATE  
☐ LAW ENFORCEMENT ☐ PAROLE/ PROBATION ☐ TREATMENT PROVIDER  
☐ MEDICAL ☐ PREVENTION/ EDUCATION ☐ OTHER \_\_\_\_\_

IN COMPLIANCE WITH THE AMERICAN WITH DISABILITIES ACT OF 1990, PLEASE INDICATE HERE IF YOU HAVE ANY SPECIAL NEEDS OR REQUIREMENTS: \_\_\_\_\_

THE AFTERNOON PORTION OF THIS TRAINING OFFERS VARIOUS BREAKOUT SESSIONS. PLEASE MARK WHICH SESSIONS YOU ARE MOST LIKELY TO ATTEND:

<b>Stalking &amp; Protective Orders:</b>	<b>Emotional Effects of DV on Children:</b>	<b>Cognitive Thinking Errors:</b>
1:45 p.m.- 3:15p.m. <input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Avoiding Collusion:</b>	<b>Physical Effects of DV on Children:</b>	<b>DV &amp; the Church:</b>
3:30p.m.- 5p.m. <input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**MAIL TO:**

DV SUMMIT 2011 Registration  
Yamhill County District Attorney's Office  
535 E. 5<sup>th</sup> Street  
McMinnville, OR 97128

**FAX TO:**

DV SUMMIT 2011 Registration  
#503-434-5760

**ADDITIONAL INFORMATION:**

Yamhill County District Attorney's Office  
ATTN: **Sarah Grabner**  
535 E. 5<sup>th</sup> Street  
McMinnville, OR 97128  
Phone 503.434.7510  
Email: [dvsummit@co.yamhill.or.us](mailto:dvsummit@co.yamhill.or.us)