

Thinking Maps, Inc.

www.thinkingmaps.com



Write...from the Beginning **Training of Trainers**

Training Dates:
June 28-July 1, 2010 &
September 14-16, 2010
8:30am - 4:00pm

Registration Fee:
\$1295.00
Per Participant

All training to be held at

Thinking Maps Inc
Training Center
401 Cascade Pointe Lane
Cary, NC 27513
(919) 678-8778

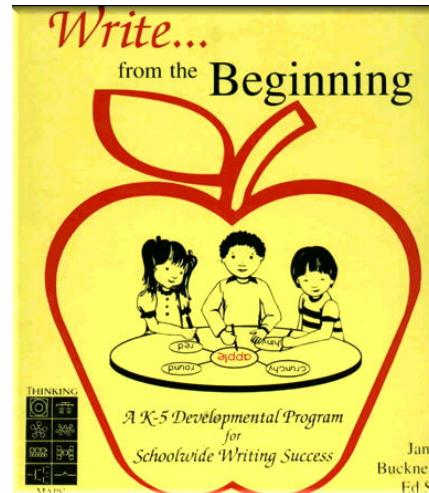
Western NC Sales Rep
Elizabeth Anne Petty
(828) 289-2953
elizabeth@thinkingmaps.com

Eastern NC Sales Rep
Morris West
(919) 812-5042
morris@thinkingmaps.com

Registration
Deadline:
June 8, 2010

To attend this training you
MUST:

- **be trained and proficient in the use of *Thinking Maps*[®]**



A K-5 Developmental Program for School-wide Writing Success

Training of Trainers will Prepare you to:

- Present the *Write...from the Beginning* concept to whole schools
- Lead introductory workshops for whole schools
- Conduct systematic follow-up visitations in each school
- Give model teaching demonstrations in classrooms
- Facilitate the development of curriculum applications
- Lead schools in assessing student learning using *Write...from the Beginning*

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Registration Form (Cary, NC – Jun/Sept '10)

\$1295.00
Registration
Fee Includes:

- 7 Days of Professional development
- WFTB K-5 Manual
- WFTB T.O.T. Manual
- Support Materials
- Continental Breakfast
- Lunch on your own

Name: _____

District: _____

School: _____

Address: _____

Address: _____

Phone #: _____

Email: _____

A Confirmation Letter will be emailed to the above email address.

Area Hotels
Hyatt Place RDU Airport
919-405-2400

Holiday Inn RDU Airport
919-465-1910

Ask for
Thinking Maps Rate

**Thinking Maps
Inc.**

401 Cascade Pointe Lane
Cary, NC 27513

Fax: (919)678-8782

Phone: (800)243-9169

or

Email:

dan@thinkingmaps.com

Actual Dates:
June 28-July 1, 2010 and
September 14-16, 2010

10 days advance notice in writing via email (dan@thinkingmaps.com) or fax (919-678-8782) is required for any cancellations/refunds. After this date, registrations will not be refunded, and districts will be billed for "no shows".

A purchase order or check must accompany this registration form. Please return your registration and payment to the address on the left.

Administrator's Signature

____/____/____
Date