

LGBT Trauma and Domestic Violence: What Clinicians Need to Know

date time location register online	8:30 AM – 4:00 PM fee	6 \$55
	Registrations will be processed only if accompanied	d by a check or purchase orde
_		
city, state, zip		
phone	X	
email		
payment method		
→ REMEMBER: Your registration will not be processed without either payment or purchase order number. Mail this form to CCSME with a check, or fax a copy of your purchase order to:		

94 Auburn Street, Suite 110 | Portland, Maine 04103 Tel: 207-878-6170 | Fax: 207-878-6172 ccsme@ccsme.org | www.ccsme.org

94 Auburn Street, Suite 110 | Portland, Maine 04103

Tel: 207-878-6170 | Fax: 207-878-6172 | ccsme@ccsme.org