

Workshop Registration Form

First Name			M.I.			Last Name		
Position			Subject Taught			Grade Level		
District Name			School Name					
School Mailing Address								
City () -			State			Zip code () -		
School Phone Number						Home Phone Number		
Email Address								
Home Mailing Address								
City			State			Zip code		

Method of Payment

Cost: **\$175 until 12/01/2021, \$195 after 12/01/2021**

<input type="checkbox"/> Check (payable to Argument-Driven Inquiry, LLC)		<input type="checkbox"/> Purchase Order #: (Include a copy of the purchase order)	
Credit Card Payment (also available online)			
<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover	<input type="checkbox"/> American Express
Account #		Expiration Date	Security Number
Name as it appears on card		Signature (for credit card only)	

☐ I have read the [ADI Workshops Cancellation & Substitutions Policy](#)

Contact Us

Phone: 512-777-4099 8 am – 4:30 pm Central	Fax this form to: 512-599-8784 Email this form to: orders@argumentdriveninquiry.com	Mail to: ATTN: Registrations 12707 Nutty Brown Rd. G-100 Austin, TX 78737	Online www.argumentdriveninquiry.com
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