



WALA TRAINING NETWORK

To be a member of the WALA Training Network companies must:

1. Be a current WALA Member.
2. Provide training to attendees from other companies.
3. Have approval from the WALA Education Committee.

Membership can be revoked by either party at any time for any reason.

Company Data

Type of Company (Provider, Consultant, etc.)_____

Company:_____

Contact Name:_____

Position Title:_____

Address:_____

City, State, Zip:_____

Phone:_____ Fax:_____

Email:_____

Website:_____

Training Data

Title of sessions: (Please list all the training sessions your company currently holds)

What is your Target Audience for these courses? (Please list titles and positions of the persons who are trained by your company)

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Jim Murphy
 Executive Director

If you have any questions, contact the WALA office. Please send this form to info@ewala.org or fax it to 608/288-0734.