



County 76 Advanced Master Gardener Training via ZOOM

Topic: _____

REGISTRATION FORM

Date: _____ Registration Fee: _____

Deadline for Registration: _____

Advanced Master Gardener classes are offered to Master Gardeners who have been in good standing in an Arkansas county for at least three years* (prior to July 1 _____ or after July 1 _____).

Current County Membership:** _____

What month/year did you train to become a Master Gardener?** _____

Are you an Active Master Gardener?** ___ Yes ___ No (*Priority will be given to active Master Gardeners*)

Is this your first Advanced Training Class?** ___ Yes ___ No

Have you ever attended any kind of Zoom session?** ___ Yes ___ No

(PLEASE NOTE: A STABLE Internet connection and computer or tablet are REQUIRED.)

Name:** _____

Address:** _____ City:** _____ St:** _____ Zip Code:** _____

Phone:** _____ Amount enclosed: \$** _____

Email address (*All correspondence is by email.*):** _____

Location of Training: via Zoom. You will be emailed a link.

** *Required entry.*

Return registration form & check or money order for \$_____/ person payable to _____ County CES.

Mail to: _____ County Extension Office

Attn: _____, Advanced MG Training

Address: _____

City: _____ St: _____ Zip: _____

For more information, contact: _____ Phone: _____

Email: _____

Participants must log into ZOOM and attend the entire class to receive Advanced Training Credit. ZOOM sessions will be monitored for attendance.

****Certificate of Completion will be emailed: ___ or mailed: ___ (*mark your preference.*)**

**Effective 11/18/2020 for AT classes, 1 year shall be counted as follows:*

If trained prior to July 1st, one year will be counted December 31 of the same year as your training.

If trained after July 1st, one year will be counted December 31 of the following year of your training.

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