SAVE PRINT CLEAR

State of California

Division of Workers' Compensation

Workers' Compensation Information System

Medical Lien Data Training

May 8, 22 & 29
10:00 - 11:30 AM PDT
WebEx
Teleconference

Pre-Registration Form

E-MAIL ADDRESS: _____

FULL NAME: _____

COMPANY: _____

PHONE NUMBER: _____

Pre-registration information:

By e-mail: wcis@dir.ca.gov

Select a training session to attend*:

- ❑ May 8, 2007 (10 – 11:30 am PDT)
- ❑ May 22, 2007 (10 – 11:30 am PDT)
- ❑ May 29, 2007 (10 – 11:30 am PDT)

* Space is limited for each training session. Registration for each session will be closed as each session becomes full.