



2016 ADVISORY BOARD TRAINING

Name: _____
(Last, first and middle initial)

Phone #: _____

Email (print neatly!): _____

Name of Board: _____

Board Secretary/Liaison: _____
(Administrative Staff or Executive Director)

Check one of the following dates for 2016, noting the different times each month:

- | | | |
|----------------------|----------------------|-----------------------|
| ___ Jan. 27, 12 Noon | ___ May 18, 12 Noon | ___ Sept. 21, 12 Noon |
| ___ Feb. 17, 8 a.m. | ___ June 15, 8 a.m. | ___ Oct. 19, 8 a.m. |
| ___ Mar. 16, 12 Noon | ___ July 20, 12 Noon | ___ Nov. 16, 12 Noon |
| ___ Apr. 20, 8 a.m. | ___ Aug. 17, 8 a.m. | ___ Dec. 21, 8 a.m. |

Location: **The Biscayne Bldg. 19 West Flagler St., Suite 820, Miami, FL 33130**

Participants are responsible for transportation and parking. Mass transit is recommended.

Please fax the completed form to (305) 579-0273 or scan and e-mail to robthom@miamidade.gov and rhonda@miamidade.gov Questions? Call (305) 579-2594.