



DELBERT HOSEMANN
Secretary of State

PRE-REGISTRATION FORM
GEMS Election Operations Training
PLEASE PRINT

Please fill out one form for each training participant, a maximum of two(2) from each county may attend.

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

COUNTY: _____

PHONE: _____ SECONDARY PHONE: _____

EMAIL ADDRESS: _____

CHECK ONE OF THE FOLLOWING THAT DESCRIBES YOUR POSITION/TITLE IN ELECTIONS:

_____ County Election Commissioner

_____ Circuit Clerk

_____ Other (Please specify) _____

PLEASE CHECK THE TRAINING SESSION YOU ATTEND:

_____ May 23 _____ May 31

_____ May 24 _____ June 1

_____ May 25 _____ June 2

_____ May 26 _____ June 3

_____ May 27

All classes will be from 9:00am – 5:00pm

at

**MS Secretary of State's Office, Ladner Building Training Room
401 Mississippi Street, Jackson, MS 39205**

Materials for session must be brought by participant.

PRE-REGISTRATION DUE BY: May 5, 2011

Please send to:

Amanda Frusha, Training Coordinator

MS Secretary of State's Office

Post Office Box 136

Jackson, MS 39205-0136

Amanda.Frusha@sos.ms.gov

(601) 359-5213 or 1-800-829-6786

FAX (601) 359-1499