

Registration Report

Report Ger #####

Topic	Webinar ID	Scheduled	Duration (r	# Register	# Canceled	# Approved	# Denied
Executive C	935 7616 2	#####	90	2	0	2	0

Attendee Details

First Name	Last Name	Email	City	Phone	Registration	Approval St	What are y	REQUIRED:
Sean	Burke	burke.sean	Madison	608-279-54	#####	approved	He/Him	In Person
Sharron	Hubbard-M	ssharron@	Madison	6.08E+09	#####	approved	She her	Zoom

REQUIRED: Agenda item Do you support Do you wish Are you being paid to represent an organization?
Yes--Continue J - Items not Neither support Yes, I wish No
No--STOP here and SUBMIT registration form