PAROCHIAL EMPLOYEES' RETIREMENT SYSTEM OF LOUISIANA

PAROCHIAL EMPLOYEES' RETIREMENT SYSTEM OF LOUISIANA (PERSLA)

Employer Information

Employer/Agency Name: _____

Approximate Number of Attendees: _____ PLAN A ☐ PLAN B ☐

Point of Contact Name: _____

Point of Contact Email Address: _____

Point of Contact Phone Number: _____

Member Training Request Form

☐ In-Person ☐ Virtual

Joint training sessions with nearby parishes are available upon request. For offices with fewer than 25 attendees, we strongly encourage joint training with nearby employers or live virtual training.

Joint Training: Yes ☐ No ☐

3 Training Dates Requested:

1. _____
2. _____
3. _____

Please note that your requested dates may not be available, as our schedule fills up quickly. However, we will gladly work with you to find a date that suits both of our schedules.

Training Location:

Address: _____

City: _____ State: _____ ZIP: _____

AUDIO/VISUAL NEEDS:

We travel with a pointer and laptop w/PowerPoint presentation.

Please circle what options will be available to present with:

☐ HDMI Hookup for Monitors/TVs/Projection Screen

☐ Microphone

☐ Wi-Fi accessibility

Return Completed Form To: LBAUDOIN@PERSLA.ORG