

# How to Register for the Workers Compensation Seminar Online

Before you begin, you will need the following information:

- Your Bar Number or Nursing License Number
- The method of payment you plan to use
- The information of any additional registrant

Please keep in mind that this process should be completed in one sitting. You cannot save your information and complete at a later time. At this time, the registration page does not support Internet Explorer. We recommend using a different internet browser, such as Google Chrome, Firefox or Safari.

If you need any additional assistance, please contact Tara Noll, Seminar Coordinator, at [tara.noll@ks.gov](mailto:tara.noll@ks.gov).

1. Start by going to the Seminar webpage at [www.dol.ks.gov/wc/seminar](http://www.dol.ks.gov/wc/seminar) and click on the *Register* link to begin the registration process.



The screenshot shows the "Workers Compensation" registration page. At the top, there is a blue header with the text "Workers Compensation" and "Registration Information". Below the header is a progress bar with three steps: "1 Registrants", "2 Registration Cont.", and "3 Summary". The main content area is titled "Registration" and contains a form with the following fields:

First Name*	Last Name*
Organization*	Organization Phone*
Organization Address 1*	Organization Address 2
Organization City*	Organization State*

\* Required

2. Fill out the following information. Fields containing a red asterisk (\*) are required. When filling in your organization name, the name should prepopulate in the drop down below. If your organization name doesn't prepopulate, continue typing.

1 Registrants      2 Registration Cont.      3 Summary


### Registration

\* Required

First Name* John	Last Name* Doe
Organization* Kansas Department of Labor	Organization Phone* 785-296-5000
Organization Address 1* 401 SW Topeka Blvd.	Organization Address 2
Organization City* Topeka	Organization State* KS
Organization Zip* 66603	Email* john.doe@ks.gov
Contact Phone* 785-296-5000	Job Title
License Type* Bar License	License ID/Bar ID* 01234567891

[+ Add Additional Registrant](#)

You cannot make changes on this page after clicking Next. Check to confirm the information entered is correct.  [Next](#)



If you need to register more than one person, click this link to add an additional registrant.


#### Additional Registrant #1

[Remove](#)

First Name* Jane	Last Name* Doe
Email* jane.doe@ks.gov	Job Title
License Type* Registered Nurse	License ID/Bar ID 0123456

[+ Add Additional Registrant](#)

You cannot make changes on this page after clicking Next. Check to confirm the information entered is correct.  [Next](#)



When you are finished, check the box confirming the information entered is correct. Then click *Next*.

3. Check which registrants will be attending the conference and if you would like continuing education credits. Select which days each registrant will be attending (i.e. Both Days, Day 1 or Day 2). The number of lunches for each registrant will prepopulate. Check if you would like your organization's name listed on your name badge and if you would like to list a different name on your badge. Finally, list any special needs our staff should be aware of, such as dietary restrictions.

Name	Attending	Continued Education	Registration Type	Lunches	Org Name on Badge	Badge Name	Special Needs
John Doe	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Early Both Days - \$155.00	2	<input checked="" type="checkbox"/>	John Doe	
Jane Doe	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Early Day 1 - \$95.00	1	<input type="checkbox"/>	Jane Doe	

Additional Lunches:

You cannot make changes on this page after clicking Next. Check to confirm the information entered is correct.  [Next](#)

If you would like any additional lunches, please select how many you would like from this drop down menu.

Once finished, check the box confirming the information is correct. Then click *Next*.

4. Confirm that all the information is correct. Then select which payment method you would like to use from the drop down menu at the bottom of the page. The payment methods available are

1. ACH Debit or
2. Credit Card.

Then click *Checkout*.

**General Information**

Full Name: John Doe | License Type: Bar License | Bar Number/License Number: 01234567891  
 Email: john.doe@ks.gov | Total Extra Lunch: 1 | Registration Type: Early Both Days-

**Organization Information**

Organization: Kansas Department of Labor | Address 1: 401 SW Topeka Blvd. | Address 2:  
 City: Topeka | State: KS | ZipCode: 66603  
 Phone Number: 785-296-5000

**Additional Parties Information**

Full Name: Jane Doe | License Type: Registered Nurse | Bar Number/License Number: 0123456  
 Email: jane.doe@ks.gov

**Payment Type**

Starting Total: \$250.00 | Discount Amount: N/A | Extra Lunch Amount: \$25.00  
 Surcharge total: \$6.88 | Total: \$281.88  
 Payment Type:  [Checkout](#)

5. Clicking *Checkout* will take you to the secured payment page. Complete the transaction on this page.
6. Once you have completed the registration and payment process, you will receive a confirmation email. It is important that you save this email as it contains your **Group-ID + PIN**.
7. Handouts will be made available prior to the seminar. Once available, you will be able to login to your account by going to the Seminar webpage at [www.dol.ks.gov/wc/seminar](http://www.dol.ks.gov/wc/seminar), clicking the *Register* link and then clicking the *Registrant Login* link in the upper right corner.



You will then use your email and Group-ID + PIN to login and download the handouts.

A screenshot of the "Registrant Login" form. At the top is the Kansas Department of Labor logo. Below it is the title "Registrant Login". There are two input fields: "Your Email" and "Your Group ID + PIN". At the bottom is a "Submit" button.

Thank you for registering for the annual Workers Compensation Seminar - the official information resource from the KDOL Workers Compensation Division.