



**Hosted by**

**When**

**Where**

**Class  
Instructor(s)**

PHOTO © AlexRaths/iStock/Thinkstock

## Registration

_____	
Name on TREC license	
_____	_____
TREC license #	Primary phone
_____	
Email address	

### CE credit

If seeking CE credit, please bring your real estate license and a valid photo I.D.

### Special services

If you require special accommodations to participate, please let us know at least three days prior to the course and attach a written description of your needs.

### Refund/cancellation policy

### Courses & fees

Members

Non-members

### Deadline

Register by \_\_\_\_\_ After deadline, add \_\_\_\_\_

### Method of payment

_____	_____
Name on card	3-digit CSC
_____	_____
Billing address	ZIP
_____	_____
Credit card number	Expiration date
_____	
Signature	

<h2>To register</h2>
----------------------