



**Hosted by**

**When**

**Where**

**Class  
Instructor(s)**

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## 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

**To register**



Provider #0001

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