



EXPO REGISTRATION FORM

Course Name: **CE WEXPO – Learning where YOU are!**

Course Location: **WEBINAR**

Course Date(s): October 1 & 2 October 1 **ONLY** October 2 **ONLY**

Mr. Mrs. Ms.

Name: _____ Designations: _____

Informal First Name: _____ Agent's License #: _____

Agency/Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

<u>Price Guide</u>	
<u>PIA Member</u>	<u>Non-Member</u>
Two Days: \$99	Two Days: \$125
One Day: \$50	One Day: \$75

Invoice Me Charge my Credit Card (Amex/Visa/MC/Discover)

Amex: _____

Visa/MC/Discover: _____

Exp: _____ Security Code: _____ (Amex on FRONT of card; Visa/MC/Discover on BACK)

Name on Card: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Mail: PIA VA/DC, 1059 Technology Park Dr, Glen Allen, VA 23059 | Fax: (804) 266-1075 | Email: carol@piavadc.com

Questions? Call (804) 264-2582 or email Sheryl@piavadc.com

Cancellation Policy: PIA reserves the right to cancel programs for insufficient registration and will give as much notice as possible if we cancel.

Attendee Cancellation Policy: September 24th and after: 50% processing fee to cancel; 25% processing fee to transfer to another class; no refund for not canceling and not showing up; no fees for substitutions.

Disabilities: In accordance with Title III of the Americans With Disabilities Act, we ask that registrants to advise us when registering of disabilities, as well as any necessary accommodations.