NORTHEAST 12-HOUR CE

BROKER

REGISTRATION FORM

12-HOUR CE COURSE - FOR BROKERS (AGENTS)

PLEASE NOTE: If you hold a real estate brokers license, you must complete 12 hours of approved CE by June 30th every year. This two-day course satisfies Indiana's 12-hour CE requirement.

Thursday, February 6, 2020

Northeast Office | 521 Professional Way, Kendallville, IN

- ☐ New Construction Course (3CE) 8 AM—11 AM
- ☐ Moisture Intrusion (2CE) 12—2 PM
- ☐ Code of Ethics (3CE) 2—5 PM

Friday, February 7, 2020

Northeast Office | 521 Professional Way, Kendallville, IN

- ☐ Getting Things Right! Avoiding and Solving problems with Correct Paperwork (2CE) 8—10 AM
- ☐ Tricky Situations and YOU (2CE) 10 AM—12 PM

CLASS FEES:

Our Best Deal!

\$75 package

for Northeast REALTOR® Members!

- Hourly Class Rate:
 - UPSTAR Members: \$10 per hour
 - REALTORS® from other associations: \$15 per hour
 - All other non-member licensees: \$20 per hour
- Package Rate (Includes all 12 hours)
 - REALTORS® from other associations: \$135
 - All other non-member licensees: \$190

Call Ashley Lanning at UPSTAR, (260) 426-4700, for questions regarding continuing education. All classes are held at the Upstate Alliance of REALTORS® (UPSTAR) office or at a specified offsite location. Pre-registration is encouraged for all continuing education programs shown above. You may register with UPSTAR via phone, or submit this form via email, fax, mail or in-person. Checks, cash, or credit cards (Visa & MasterCard) are accepted. Limited seating is available for walk-ins—taken on a first come, first served basis. CANCELLATION POLICY: You must cancel in writing 24 hours in advance to receive a refund.

REGISTRATION AND PAYMENT No reservations will be taken without payment.

□ VISA □ MAST	TERCARD	LOSED (Make check payable to UPSTAR) Submit completed form via:
MAIL: UPSTAR, 3403 E.	. Dupont Road, Fort Wayne,	IN 46825 FAX: (260) 422-9966 EMAIL: Ashley@UpstarIndiana.com
CALL: You may also ca	all the UPSTAR office at (260)) 426-4700 to register over the phone with a MasterCard or Visa.
Name (Please print):		
		License#:
Company Name:		
Total Payment: \$		Check No. (If paying by check)
CREDIT CARD INFORMAT	ΓΙΟΝ	
Name on Card:	Acct#	