

UPSTAR 30-HOUR CE COURSE

REGISTRATION FORM

NEWLY LICENSED BROKERS | 30-HOUR POST LICENSING COURSE

Please Note from IAR: A newly licensed Broker is someone who first earned their real estate license after July 1, 2014. They must complete a specific 30-hour post-licensing course within 2 years of licensure. This course takes the place of CE during that time. After the 2-year period, you must complete 12 CE hours every "year" (July 1 - June 30) just like all other Brokers.

FOUR CLASS DAYS - March 2019

UPSTAR Office | 3403 E. Dupont Road, Fort Wayne, IN

- Wednesday, March 6 (8CE) 8 AM -5 PM
- Wednesday, March 13 (8CE) 8 AM -5 PM
- Wednesday, March 20 (8CE) 8 AM -5 PM
- Wednesday, March 27 (6CE) 8 AM -3 PM

CLASS FEES:

Our Best Deal!
\$225 Package

for UPSTAR REALTOR® Members!

■ Non-Member Package Rate
(Includes all 30 hours) | \$300

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 fax, mail or deliver your registration to UPSTAR. 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.*

REGISTER ONLINE: UPSTAR members (only) may register online at UpstarIndiana.com with a MasterCard of Visa

REGISTER BY PHONE: Call the UPSTAR office at (260) 426-4700 with a MasterCard of Visa

REGISTER VIA THIS FORM: VISA MASTERCARD CHECK ENCLOSED (Make check payable to UPSTAR)

Submit form via: **MAIL:** 3403 E. Dupont Rd, Fort Wayne, IN 46825 **FAX:** (260) 422-9966 or **EMAIL:** Ashley@UpstarIndiana.com

Name (Please print): _____

NRDS#: _____ License#: _____

Phone: _____ Email: _____

Company Name: _____

Company Address: _____

Total Payment: \$ _____ Check No. (If paying by check) _____

CREDIT CARD INFORMATION

Name on Card: _____ Acct# _____

Exp: _____ Signature: _____