



MACT REGISTRATION FORM

Instructions: Registrations for all MACT courses are accepted on a first-come, first-served space available basis. To register, complete this form and send it with your registration fees and the appropriate course fee. We will acknowledge your registration by return e-mail/mail at least ten (10) days prior to the start of the first session. Registration fees are non-refundable, but tuition fees are fully refundable upon written request up to two weeks prior to the start of the course. PLEASE NOTE THAT ONCE REGISTERED FOR A COURSE, STUDENTS ARE RESPONSIBLE FOR PAYMENT OF FULL COURSE FEES EVEN IF UNABLE TO ATTEND ALL CLASS SESSIONS.

Name: _____ Date: _____

Address: _____ City, State, Zip: _____

Phone:) _____ (Wk) _____ (Cell)

E-Mail Address: _____

Employer/Occupation: _____

Who pays for your training? _____

I will be attending training _____ Jackson _____ Gulf Coast

Registration Fee (\$45 Members, \$75 Non-Members): \$ _____

MACT Text Book (\$130 Members, \$155 Non-Members): \$ _____

Course Fee (\$275 Members; \$320 (Non-Members): \$ _____

(Per Course; there are 4 courses)

MAAP Membership Dues (Optional) \$50: \$ _____

(You may call the MAAP office for prorate amounts)

TOTAL AMOUNT: \$ _____

(Please Print)

Total Amount Enclosed \$ _____

Payment Type: Check/Money Order _____ Payable to "MAAP"

Amount Authorized to Charge Credit Card: VISA _____ MasterCard _____ (Sorry, No AmEx)

Credit Card No: _____ Expiration Date: _____

Signature*: _____ Card Verification Number _____

***By signing below you authorize MAAP to charge this credit/debit card for the amount shown above. You also hereby guarantee payment of the amount shown above.

Billing Address: _____