



REGISTRATION FORM

REGISTRATION FEES:

MEMBERS

\$399 until October 3, 2010 or **\$450** after

NON-MEMBERS

\$499 Non-member licensees (CE only)

GRI DESIGNEES

Audit one GRI section for **\$250**

RETURN TO RACI:

FAX: (765) 457-0096

MAIL: RACI, 1620 East Hoffer St., Kokomo, IN 46902 - (866) 657-7224 (ph.)

E-MAIL: pam@raci.org

Check payable to RACI

REALTORS® wishing to attend classes for CE only may do so at \$20 per credit hour with minimum of 8 hours, subject to space availability.

Name: _____

NRDS: _____ RE License #: _____

Address: _____

City: _____ ST: _____ Zip: _____

Mobile Ph: _____

E-mail: _____

Local Board/Assoc: _____

Firm Name: _____

Firm Address: _____

City: _____ ST: _____ Zip: _____

Firm Ph: _____



GRI COURSE SELECTION (Check One)

REALTOR®/REALTOR® Associate	<i>Early Bird Fee</i> By 10/3/10	<i>Regular Fee</i> After 10/3/10
<input type="checkbox"/> GRI 101	\$399	\$450
<input type="checkbox"/> GRI 201	\$399	\$450
<input type="checkbox"/> GRI 301	\$399	\$450
<input type="checkbox"/> I am a GRI auditing this class	\$250	
<input type="checkbox"/> Non-member Licensee (CE only)	\$499	



I will require special assistance to fully participate in the GRI.

REGISTRATION will close October 13, 2010.

Enclosed is my check for \$ _____. Payable to RACI.

Please charge my MC VISA DISCOVERY
in the amount of \$ _____.

Card Number: _____ Exp. Date: ____/____

Cardholder's Billing Address: _____

City: _____ ST: _____ Zip: _____

Cardholder's Signature: _____