NAAEI Credential Course REGISTRATION





Select Program:					☐ CAS
Start Date:			_Course Fee:		
_	above) of an on	line exam(s),	and satisfactory of	•	the curriculum, succe Iditional projects. Det
STUDENT	INFORM	NOITAN			
Student Name_					
Company/Proper	rty				
Business Street A	ddress				
Business Phone #	<u> </u>		Student Cel	l#	
Email Address					
Datestudentente	ered the apartm	entindustry	(Month/Year)		
Supervisor Sign	ature				
TUITION /	PAYMEN	NTINFO	DRMATIO	N	
available for any	NAAEI Credent	ial courses. N	lo-Shows will also	be responsible	ations or Refunds wi for the full tuition. of course materials.
Method of Paym	ent				
☐ Invoice my co	mpany/propei	ty in full	☐ Please conta	act me to discus	s payment plan opti
	card below:		☐ Payment En	closed	
☐ Bill the credit		Discover			
O Visa O MC Card#					
O Visa O MC Card# Expiration Date_		Se	curity Code		ling Zip

FINALIZE YOUR REGISTRATION

the Education tab for further details.

Scan and Email this completed form to Member Services at membersvcs@greatercaa.org.