



Public Housing Management

Seminar Registration Form

For more information about this class including current seminar locations and dates, please call us at **800.783.3100** email sales@nanmckay.com, or visit our online store at nanmckay.com

Seminar Schedule

Day One: 8:00 A.M. Registration
Day Five: 11:30 A.M. End of seminar
3:30 P.M. End of exam

Registration Options

We are able to offer a reduced price for this class because it is being hosted by a local housing authority.

- Seminar Fee #101-004.....**\$1,200**
- In-class Certification Exam #100-004 (Included in registration fee) **OR**
- Online Certification Exam #11006-EXAM (Included in registration fee)

Seminar Dates and Locations

October 17-21 in Fort Wayne, IN
Fort Wayne Housing Authority
7315 Hanna Street
Fort Wayne, IN 46816

Registration contact: Jason Lee
Phone: (800) 783-3100 x146
Email: jason@nanmckay.com

Hotel Recommendations

Hilton Fort Wayne at the Grand Wayne Convention Center
1020 S. Calhoun Street
Fort Wayne, IN 46802
Phone: (260) 420-1100

Courtyard Fort Wayne Downtown at Grand Wayne Convention Center
1150 Harrison Street
Fort Wayne, IN 46802
Phone: (260) 490-3629

Policies

Hotel Recommendations: Please note that these are only recommendations. We also recommend asking for the government rate when booking rooms at any hotel. **Cancellations:** If you are unable to attend this seminar, you may send a substitute or receive a credit toward a future seminar, to be attended within a one-year period. If you are unable to attend, you must notify NMA in writing at least 60 calendar days prior to the start date of the seminar. If you do not notify NMA in writing, you are responsible for the entire registration fee. If you cancel less than 60 days prior to the start date of this seminar, a cancellation fee of \$150 will be assessed. Substitutions must be in writing on company letterhead with the seminar name, location and attendee name, and received by NMA prior to the seminar start date. NMA reserves the right to cancel a seminar at any time. If a seminar is canceled by NMA, registration fees will be refunded or credited in full. NMA is not responsible for airfare, lodging or other related expenses. Please plan ahead by purchasing refundable airfare. **Retaking Exams:** Exam retake options vary; call for details. You are permitted to fail an exam three times before you are required to retake the seminar. NMA reserves the right to change any policies or pricing at any time and in its sole discretion. For more information regarding refund, complaint and program cancellation policies, please contact our offices at 800.783.3100.

Attendance Information

Print names as you would like the name to appear on the certificate.

- Please check here if you are disabled and require a specific accommodation in order to participate in this seminar. A form will be sent to process your request.

Attendee 1 Full Name: _____

Email Address (Required): _____

Attendee 2 Full Name: _____

Email Address (Required): _____

Attendee 3 Full Name: _____

Email Address (Required): _____

Attendee 4 Full Name: _____

Email Address (Required): _____

Please include a shipping address that is not a P.O. Box. We will ship you a plaque if you purchase and pass the certification exam for this seminar.

Agency: _____

Phone: _____ Fax: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Shipping Address (No P.O. Boxes): _____

City: _____ State: _____ Zip: _____

Payment Options

To register using a credit card or purchase order, fax a completed registration form to 619.258.5791. Make checks payable to Nan McKay & Associates, Inc. and mail the registration form(s) with your check to 1810 Gillespie Way, Suite 202, El Cajon, CA 92020. Payment must be received before registration can be confirmed. Please select one of the following payment options.

Order Total: _____

Purchase Order Number: _____

Check Payable to NMA Enclosed – Check #: _____

Charge my Credit Card: VISA Master Card American Express

Name on Credit Card: _____

Credit Card Number: _____

Security Code: _____ Expiration Date: _____ / _____

Authorized Signature (Please sign on the line below)
