

2009 Fall Workshop Registration Form

NAME _____ TITLE _____

AGENCY _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____

Please use one form per registrant and block print or type information in all CAPITALS

Please check the box if you are a first time attending Delegate.

EARLY Registration Fees (Must register before ----
Monday, October 26, 2009 to receive these rates.):

SERC Members Only.

- Delegate \$275
- Guest \$200 Print Full Name of Guest:

LATE Registration Fees (Applicable on and after
Monday, October 26, 2009.):

SERC Members Only.

- Delegate \$350
- Guest \$250 Print Full Name of Guest:

REGISTRANT NAME (PHA Staff or Commissioners may not register as a guest) TITLE

Non Members of SERC (Must register before -----
Monday, October 26, 2009 to receive these rates.):

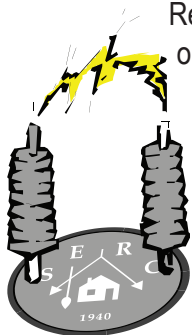
- Delegate \$300
- Guest \$225 Print Full Name of Guest:

Non Members of SERC (Applicable on and after
Monday, October 26, 2009):

- Delegate \$375
- Guest \$275 Print Full Name of Guest:

REGISTRANT NAME (PHA Staff or Commissioners may not register as a guest) TITLE

Register on line at <http://www.serc-nahro.org/>
or mail payment made out to **SERC, INC** to:



c/o Angela Lemmond-Strickland
Brunswick Housing Authority
PO Box 1118
Brunswick, Georgia 31521-1118
email: bwkhous@comcast.net
Telephone - 912-265-1334
FAX - 912-265-1280

Cancellation Policy:

Written notice of cancellation must be postmarked by **Friday, October 30, 2009** to receive a refund minus a \$50 cancellation fee. No Refunds after **Friday, October 30, 2009** will be provided. Faxed cancellations after **Friday, October 30, 2009** will not be accepted. Payment must accompany forms.