

Registration Form

How to Register

Fax: +1 732 694 1800
Online: www.icsc.org/2018S03
Mail: ICSC
P.O. Box 26958
New York, NY 10087-6958

Registration Fees

	Advance	On-site
Member*	\$ 85	\$125
RPLS Member	\$ 85	\$125
Non-Member	\$ 110	\$155
Student Member**	\$ 50	N/A

*To qualify for the member rates, each registrant must be a member or an affiliate member of ICSC. To become an ICSC member, call ICSC information services at +1 646 728 3800.

**Student members must register in advance to qualify for the student rate. Student registration will not be offered on-site.

Deadlines

To qualify for the advance registration rates, your registration must be received by **February 1, 2018**.

Cancellations

All cancellations are subject to a \$25 cancellation fee. No refunds will be given for cancellations received after **January 31, 2018**. All requests for refunds must be received by ICSC in writing.

Special Needs

Anyone desiring an auxiliary aid for this meeting should notify **Theresa Orlando** at **+1 646 728 3691** no later than **January 31, 2018**.

Continuing Education Credit

ICSC-Certified professionals earn 1.0 credit (A3) towards certification renewal.

See page 2 for information on Michigan Real Estate Credits.

Terms, Conditions and Rules

This Registration Form is subject to ICSC Terms, Conditions and Rules for Event Registrants available at www.icsc.org/event-terms-and-conditions, which are hereby incorporated by reference.

Please Check One: ICSC Member*/Real Property Law Section Member Non-Member Student Member**

Name _____ Title _____

Company _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Telephone _____ Fax _____

Email _____ Your Membership I.D. # _____ (2017S03)

REQUIRED FOR NON-U.S. APPLICANTS: _____ Date of Birth _____ Country of Citizenship _____

Please check here if any of the above information has recently changed.

Method of Payment

Check made payable to ICSC enclosed for \$ _____ MasterCard Visa AMEX Discover \$ _____

Name (as it appears on credit card) _____ Signature _____

Credit Card Number (include all digits) _____ Expiration Date (month/year) _____