

# CABI EDUCATIONAL COURSE REGISTRATION FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

<b>COURSES:</b>	<b>IBBA #220 (8 Credit Hours)</b> <b>Intro To Pricing Small Businesses</b>	<b>IBBA #221 (8 Credit Hours)</b> <b>Pricing Small Businesses</b>
<b>INSTRUCTOR:</b>	<b>Dale Clack CBI</b>	<b>Dale Clack CBI</b>
<b>DATES/TIMES:</b>	<b>Wednesday, October 30, 2013</b> <b>8:00 a.m. to 5 p.m.</b>	<b>Wednesday, November 6, 2013</b> <b>8:00 a.m. to 5 p.m.</b>
<b>WHERE:</b>	<b>Nextage Legacy Realty</b> <b>(Orchard &amp; I-25)</b>	<b>Kaplan Professional Schools</b> <b>(Colorado &amp; I-25)</b>
<b>COST:</b>	<b>IBBA #220</b> <input type="checkbox"/> \$245 for CABI Members <input type="checkbox"/> \$295 for Non-CABI Members	<b>IBBA #221</b> <input type="checkbox"/> \$245 for CABI Members <input type="checkbox"/> \$295 for Non-CABI Members

***(continental breakfast, box lunch and course materials are included)***

ARE YOU A CABI MEMBER?     **YES**     **NO**    IT PAYS TO BE A CABI MEMBER!!!

**REGISTRATION DEADLINES: Friday, October 25, 2013 and Friday, November 1, 2013**  
Refunds requested before the deadlines shall be for 50% of the course price or for 60% credit towards your next CABI-sponsored IBBA course.

Total Enclosed: \$ \_\_\_\_\_     VISA/MC     Check    (choose one)

VISA/MC #: \_\_\_\_\_ CVC: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

For Office Use Only:	Captured no. _____	Reference no. _____
Date Paid: _____	Amount: \$ _____	Form of Payment: _____

<b>VISA/MC:</b> Please email, mail or fax registration to: OR	CABI 2013 Fall Educational Courses c/o Merle Northrop CBI
<b>CHECKS:</b> Please mail check and registration to:	1600 38th St., Ste. 203 Boulder, CO 80301 Office: 303-440-6141 Fax: 866-310-1376 Email: merle@businesssolutionsadvisory.com