BOMA EDMONTON / BOMI CANADA REGISTRATION FORM ACCELERATED REVIEW STUDY METHOD

CONTACT INFORMATION										
First Name:			Mic	Middle Name			Last Name:			
Company Name:										
E-mail:										
Company Address:				Residence Add		ess:	:			
City:			Prov: PC:		City:	City:		Prov: PC:		
Tel:			Fax:		Tel:		1	Fax:		
Marks: Mail ma		Mail marks	s to my home		AA EDMONTON: Yes, my		Yes, my con	company is a BOMA member		
(allow 6 wks)		Mail marks	Mail marks to my office				No, my company is NOT a BOMA member			
MATERIALS:		I will arrang	arrange for binder pick up		Out of town students:		Yes, I am an	an out of town student		
(Out-of-town		Courier bin	ier binder to my office							
see side note) Courier b		Courier bin	nder to my home		Out-of-town students responsible for delivery costs — Post unless specified. Charges added to course cost—					
ENROLLMENT OPTIONS (CHOOSE ONE)										
I am a BOMI student enrolled in the BOMI designation program: RPA FMA										
I am a BOMI designation holder who wants to enroll in an additional designation program: RPA FMA \$115										
10	I am a new student who wants to enroll in the BOMI designation program: RPA FMA \$265									
I am a new student who wants to take an individual course only. \$115 (first course may be applied to \$225 designation fee)									lesignation fee)	
COURSE REGISTRATION										
Course				DATES		Lo	CATION		FEE(S)	
						Ec	dmonton, AB,			
				TOTAL COURSE FEES						
CANCELLATION POLICY										
Written notification of cancellation or transfer to self-study (BOMI transfer fee charged) must				GST				IAL COURSE)		
be received 10 working days pridate. Full fees apply after this do							JNT DUE			
PAYMENT										
Credit Card: VISA Mastercard					Billing Address:					
	Card #:			Exp:	City:		ı	Prov:	PC:	
Cheque enclosed					Contact Person:					
	Invoice (B									

BOMA Edmonton