



REGISTRATION



Please email a completed copy of this registration form to tcc.faep@gmail.com.

Name: _____

Organization: _____

Address _____

Email Address _____

Telephone Number _____

FAEP Member? Yes No Chapter: _____

FAEP Member Fee: \$35 • Non-Member Fee: \$49

Payment will be made by: Check Credit Card

Payment by Check:

Checks should be made out to “TCC-FAEP” and mailed to:

Rick Harman
c/o Wantman Group, Inc.
2035 Vista Parkway
West Palm Beach, FL 33411

Payment by Credit Card:

If you select this option, an electronic invoice will be emailed to the email address provided above.

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