

# registration form

## 4 Easy Ways to Register

**ONLINE** [www.caionline.org/pmdp](http://www.caionline.org/pmdp). Register online four weeks ahead and receive a \$25 discount.

**CALL** CAI's Member Service Center at (888) 224-4321

**FAX** form to CAI at (240) 524-2424

**MAIL** form with payment to CAI, P.O. Box 34793, Alexandria, VA 22334-0793. Call ahead to ensure space.

JOIN CAI NOW  
& receive the  
member rate.  
Call (888)  
224-4321.

Check here if this is new contact information.

Please print or type.

Check one of the following.

- I am an individual manager member or the primary contact for a management company member of CAI. Member # \_\_\_\_\_
- I am a member of CAI, but not an individual manager or the primary contact for a management company member. Member # \_\_\_\_\_
- I am not a member.

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

COMPANY/ASSOCIATION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY/STATE/ZIP+4 \_\_\_\_\_

COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

COURSE(S)/DATE(S)/LOCATION(S) \_\_\_\_\_

### M-100 SEMINAR

CAI member	\$445	\$ _____
3rd or additional registrations (same course, members only)	\$395	\$ _____
<i>Please attach list of additional registrants' contact information.</i>		
Nonmember	\$545	\$ _____

**M-100 ONLINE** To register for the M-100 online, visit [www.caionline.org/edcenter](http://www.caionline.org/edcenter). Cost is \$445 for CAI members and \$545 for nonmembers.

You must be an individual manager member or the primary contact for a management company member of CAI to have access to APCM and receive the member discount on the following courses. All other CAI members must pay the nonmember rate for 200-, 300- and 400-level courses.

### M-200/300/400 SERIES COURSES

APCM member (CAI individual manager or management company member)	\$445	\$ _____
3rd or additional registrations (same course, APCM members only)	\$395	\$ _____
<i>Please attach list of additional registrants' contact information.</i>		
Nonmember	\$545	\$ _____
	<b>TOTAL</b>	\$ _____

### PAYMENT METHOD

Check payable to CAI enclosed  Visa  MasterCard  American Express  Discover

NAME ON CARD \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

SIGNATURE \_\_\_\_\_ EXP. DATE \_\_\_\_\_

