

## MACT REGISTRATION FORM

Instructions: Registrations for all MACT courses are accepted on a first-come, first-served space available basis. To register, complete this form and send it with your registration fees and the appropriate course fee. We will acknowledge your registration by return e-mail/mail at least ten (10) days prior to the start of the first session. Registration fees are non-refundable, but tuition fees are fully refundable upon written request up to two weeks prior to the start of the course. PLEASE NOTE THAT ONCE REGISTERED FOR A COURSE, STUDENTS ARE RESPONSIBLE FOR PAYMENT OF FULL COURSE FEES EVEN IF UNABLE TO ATTEND ALL CLASS SESSIONS.

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

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ (Wk) \_\_\_\_\_ (Cell)

E-Mail Address: \_\_\_\_\_

Employer/Occupation: \_\_\_\_\_

Who pays for your training? \_\_\_\_\_

**I will be attending training** \_\_\_\_\_ **Jackson** \_\_\_\_\_ **North MS**

Registration Fee      \$45 Members: \$ \_\_\_\_\_      \$75 Non-Members: \$ \_\_\_\_\_

MACT Text Book:      \$130 Members: \$ \_\_\_\_\_      \$155 Non-Members: \$ \_\_\_\_\_

Course Fee:      \$275 Members: \$ \_\_\_\_\_      \$320 Non-Members: \$ \_\_\_\_\_  
(Per Course; there are 4 courses)

Membership Dues      \$ \_\_\_\_\_      \$0 Non-Members: \$ \_\_\_\_\_  
(Dues are from 01/01—12/31 of each year.  
call the MAAP office for prorate amounts)

**TOTAL AMOUNT:**      \$ \_\_\_\_\_      \$ \_\_\_\_\_

*(Please Print)*

Total Amount Enclosed \$ \_\_\_\_\_ # \_\_\_\_\_ Check/Money Order Payable to "MAAP"



Online payment

Amount Authorized to Charge Credit Card:

Credit Card No: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature\*: \_\_\_\_\_ Card Verification Number \_\_\_\_\_

\*\*\*By signing below you authorize MAAP to charge this credit/debit card for the amount shown above. You also hereby guarantee payment of the amount shown above.

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

(Credit/Debit card payment pay be mailed, faxed, or emailed to the MAAP office or on the website by using the button above)

4785 Old Canton Road, Jackson, MS 39211 ` Fax - 601-321-2086 ~ Email -

**Submit**

Rev-8-2018