

August 6 – 10, 2018

REGISTRATION FORM - NHTCA/NHCTCA CERTIFICATION PROGRAM

Name _____ Title _____

Municipality Mailing Address _____, NH Zip _____

Phone _____ Fax _____

Municipality _____ E-mail _____

Auditor _____

Address for future mailings (if different) _____

Course choice: A____ B____ C____ D____ (See next page for choices) Class Year is 2018.

Please Indicate your Attendance Year: 1____ 2____ 3____ (Indicate Shirt Size _____) 4____

This program is offered on a weekly or daily basis. Choose the program that best suits your needs.

Weekly Fee (includes room, board, lunch* and registration fee)	435.00	_____
Add \$100.00 for a single room	100.00	_____
Commuter Fee (includes lunch* for 5 days and registration fee)	260.00	_____
Day course for those not attending full week - <u>Registration Fee</u>	60.00	_____
Monday (includes lunch)*	40.00	_____
Tuesday " "	40.00	_____
Wednesday " "	40.00	_____
Thursday " "	40.00	_____
Friday " "	40.00	_____
Recertification Fee (includes registration & lunch) Thursday, August 9 th	75.00	_____
	TOTAL DUE	_____

***Note: We are unable to accommodate special dietary requests. Please plan accordingly.**

If you are staying at the Hampton Inn, please give us the following information:

Single room? Yes____ No____ **Check In:** Sunday____ Monday____

If sharing a room, give the name of the person you are sharing with _____

Willing/able to help at hotel or during classes (please indicate availability) _____

Are you interested in helping provide snacks? We ask anyone who likes to bake and would like to provide a snack to indicate so and what day (Mon, Tues, Wed, Thur) you can help us out with. We have had cookies, muffins, sweet breads, etc. Whatever your passion. Please indicate _____

PLEASE NOTE: ATTENDANCE AT SPRING WORKSHOPS AND/OR FALL CONVENTION FOR TAX COLLECTORS; REGIONAL MEETINGS AND/OR FALL CONVENTION FOR CITY/TOWN CLERKS IS NECESSARY TO ATTAIN OR RETAIN CERTIFICATION. IT IS ALSO NECESSARY TO ATTEND A RECERTIFICATION CLASS AT LEAST ONCE EVERY 5 YEARS. FOR MORE INFORMATION, PLEASE SEE ATTACHED RULES & REGULATIONS.

This registration form together with payment or signed purchase order must be received by July 6, 2018.

*****Absolutely no changes can be made after July 27, 2018*****

Make checks payable to "NHTCA/NHCTCA JOINT CERTIFICATION PROGRAM"

Send checks to: NHTCA/NHCTCA JOINT CERTIFICATION COMMITTEE
c/o Katie Gargano, Treasurer
316 Central Street
Franklin, NH 03235

Date of Confirmation: _____ Check # _____ Amount \$ _____