

Contract Compliance Associates

A Practical Guide to Government Contract Audits ACG1420 Course Registration

All courses run from 9:00 am until 4:30 pm. Registration starts at 8:30 am.

Name: _____
Title: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip code: _____ - _____
E-mail address: _____
Telephone: _____

I would like to register for the following course date:

- 07 March 2008 – Orlando, FL 09 May 2008 – Las Vegas, NV
 28 March 2008 – Arlington, VA 11 July 2008 – San Jose, CA

Tuition total: \$ 395.00

Please indicate Method of Payment:

- Check – Payable to Contract Compliance Associates
 Credit card: VISA Mastercard American Express

Note: For VISA and Mastercard only: Please provide your CV code (the last 3 digits located on the signature panel on the back of your card)

CV Code: _____ Card Number: _____ Exp: _____

Card Holder Name: _____

Signature: _____

- FAX Orders: Please FAX completed form to (407) 349-1448.
- Phone Orders: Please call (407) 349-3955. A representative will request the information shown above.
- eMail: For your security, please complete the form, scan it to Portable Document Format (pdf), and attach it to an email to: service@concompass.com.
- Checks: Payment may be mailed to: Contract Compliance Associates, 1809 E. Broadway, Suite 349, Oviedo, FL 32765.

Thank you for your order and we look forward to your participation.