SHRM Learning System Course Registration – Please Print

1. _____
Name (list name you will use when you register to take exam, including middle initial)
2. _____
Title
3. _____
Organization/Company
4. _____
Home Address
5. _____
City State Zip
6. _____ 7. _____
Home phone **Business Phone**
8. _____
Fax
9. _____
E-mail

Payment: ☐ $989 ☐ $950 – Member of Eastern Panhandle SHRM

□ Check enclosed. (Make checks payable to Blue Ridge CTC)
□ P.O. #_____ (Copy of P.O. required.)
□ Credit Card: □ Visa □ MasterCard □ Discover
Account #_____
Cardholder name_____
Signature_____

No refunds after materials are ordered.
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For more information, contact Pat Hubbard at 304-725-7104 or at phubbard@blueridgectc.edu

Register by Wednesday, February 17, 2010

Phone: Call Megan at 304-260-4380 x2403. Please be prepared to provide credit card information.

Fax: Fax the completed registration form and credit card information to Megan at 304-260-1754.

Mail: Mail the completed registration form and check, P.O. or credit card information to:
Megan Scott,
Blue Ridge CTC, 400 West Stephen Street, Martinsburg, WV 25401