



1. Choose your session

Oct 25 Full Day Oct 25 Half Day am pm

Full Day Half Day
\$245 \$165

Group / Government Rate: (Group 3 from same firm, please include attendee names)

Full Day Half Day
\$215 \$150

2. Personal Information

| | | | | |
|------------------------------|-----------|----------|---------------------|--------|
| Name | | | | |
| Please Select | Architect | Engineer | Landscape Architect | Other: |
| Company | | | | |
| Address | | | | |
| City | | State | Zip | |
| Phone | | | | |
| Email | | | | |
| AIA/ASLA No. (if applicable) | | | | |
| GBCI No. (if applicable) | | | | |

3. Payment Information

Check payable to **DPC Continuing Education Inc.**

Credit Card Master Card Visa American Express

| | | |
|------------------------------|--|-----------|
| Credit Card No. | | Exp. Date |
| Name (As it appears on card) | | |
| Authorized Signature | | |
| Billing Address | | |
| City | | State Zip |

4. Send it in!

via fax: 516-730-5083

by Mail: DPC Continuing Education, Inc.

5 Terry Lane, Plainview, NY 11803

or email to: info@dpcceinc.com

or **call us at 516-681-0057** with the information on this form