Southern New England Chapter of the IIA (SNE IIA) COURSE REGISTRATION FORM

Name of Course: **DOUBLE WEBCAST**, May 19, 2009

Location: The UTC Headquarters, Gold Bu	uilding, 1 Financial P	laza, 22nd Floor, Hartford, CT
Please fill in the following information:		
Name:		
Company Name:		
Address:		
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City State	Zip Code	
Telephone: ()		
Email Address:		
Payment Method Payment is due prior to the training session Check one: Check enclosed payable to Southern N Credit Card, provide credit card infor Visa Master Credit Card #	Tew England IIA* mation below ** Card Expiration Date	
Name on Card		D : (0 M / M
Signature Credit Card, provide credit card over	the phone ***	Receipt? Yes / No
* If registering and paying by check, you m SNE-IIA, c/o Chris Trovato, 64 Wynding bor send via email to: registeriia@sbcglobal.	nay <u>either</u> mail the reg Hills Rd, East Granby	, CT 06026
** If paying by Credit Card on the registration form, please mail registration form to: SNE-IIA, c/o Chris Trovato, 64 Wynding Hills Rd, East Granby, CT 06026. A credit card receipt will be provided. Please provide your email and mailing address on the registration form.		
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*** If paying by Credit Card and you do not wish to leave your credit card information on this form, you may send the registration form to: SNE-IIA, c/o Chris Trovato, 64 Wynding Hills Rd, East Granby, CT 06026, and provide a contact phone number and you will receive a follow-up phone call to collect your credit card information. A credit card receipt will be provided. Please provide your email and mailing address on the registration form.