



IDAHO
REAL ESTATE COMMISSION
www.irec.idaho.gov

575 E. Parkcenter Blvd., Suite 180
Boise, ID 83706
Toll-free in Idaho (866) 447-5411
Office: (208) 334-3285 Fax: (208) 334-2050

IREC use only

Commercial Real Estate Course Registration

The Real Estate Commission and the CCIM Institute present 14 hours of reduced cost commercial continuing education.

WHAT:

- March 8 — E0779 Troubled Assets Workshop (7 hours CE) – Steve Price, CCIM
- March 9 — E0914 Real Estate Financial Analysis Using Excel (7 hours CE) – Jeff Engelstad, CCIM

TIME:

8:30-5:00 pm each day

WHERE:

Idaho Real Estate Commission - 575 East Parkcenter Blvd., Suite 180, Boise, ID 83706

COST:

- \$75 per class for Idaho licensees
- \$175 per class for non-Idaho licensees

Funding for the delivery of these courses has been provided by the Idaho Real Estate Commission through civil penalty fine money pursuant to Idaho Code 54-2059(4).

I want to attend (choose one):

- E0779 Troubled Assets Workshop, March 8, 2012 (\$75 Idaho licensees/\$175 non-Idaho licensees)
- E0914 Real Estate Financial Analysis Using Excel, March 9, 2012 (\$75 Idaho licensees/\$175 non-Idaho licensees)
- Both courses, March 8-9, 2012 (\$150 Idaho licensees/\$350 non-Idaho licensees)

Confirmation of your registration will be sent by e-mail.

Name _____ Idaho RE License # (if applicable) _____

Email Address (required) _____

Mail/fax this form to:

Idaho Real Estate Commission
575 E. Parkcenter Blvd., Suite 180
Boise ID 83706
Fax: 208-334-2050

Payment Methods:

- Personal Check
- Cash (in person and exact change only)
- Debit or Credit Card



Please advise the Commission of any individuals with disabilities needing accommodations.

Make checks payable to:
Idaho Real Estate Commission (IREC)

Refund Policy

Because of rising costs associated with issuing a refund, it is the policy of the Idaho Real Estate Commission to refund overpayments of under \$25 only if requested in writing within 30 days of the Commission's receipt of the overpayment. Overpayments of \$25 or more will be automatically refunded to the licensee. There will a \$20 fee assessed for each check returned for insufficient funds.



IREC use only

License #: _____
 Receipt #: _____
 Approved: _____

CREDIT/DEBIT CARD AUTHORIZATION FORM

MasterCard Discover Visa American Express

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Card Number:

Amount: \$ _____ Card Expiration Date: _____

Cardholder Name: _____
 (As it appears on the Credit/Debit Card)

Billing Address: _____
 (Street Address)

 (City) (State) (Zip)

Payment For: _____

This document will be destroyed after payment has been processed.