



**7100 Baltimore Ave., Suite 402  
College Park, MD 20740  
(301) 403-2740x27**

# Seminar Registration Form

**PLEASE READ:**

I understand that my completed registration form and credit card payment must be received by 5 p.m. four (4) days prior to class date to ensure acceptance. Payments made by check must be received **NO LATER** than 7 days prior to class to ensure processing. No walk-in registrations accepted on day of class. No refunds will be issued unless class is cancelled by MD PTAP.

**ADULT ONLY CLASSES** (No infants or children please).

**Please Print**

Name

Sex: **M**  **F**

Address

City State Zip

Phone

E-mail

**Ethnic Group** (check one)

- Native American     Asian     Black / African American     White  
 Native Hawaiian / Pacific Islander     Hispanic

**Are you in Business?**

- Yes**      **How Long?**  
 **No**

- Legal Entity:**     Sole Proprietor     Partnership     Limited Liability (LLC )  
 Corporation (circle type) S/C

**Military Status**

- Veteran     Vietnam Veteran     Non-Veteran     Service Disabled Veteran

**Business Name:**

**Title**

**Mail completed form with payment to address above. For credit card payments, fax completed registration to (301) 403-2743.**

Seminar/Class

Title: **The Basics of Government Certifications 8(a), SDB/MBE**

Date: **3/20/09**

Time: **8:30am - 10:30am**

Location:

**Planning Commission Conference Room  
Courthouse Square Building  
205 Main Street  
Prince Frederick, Maryland**

Fee: **\$20 per person Calvert County Business Owner/Representative  
\$30 per person for non-Calvert County Business  
Owner/Representative**

**Payment Type:** Visa MasterCard Money Order **NO CASH ACCEPTED**

(Check / Money Order: Make Payable to **University of Maryland -MD PTAP**)

**Credit Card #**

**Exp. Date**

**Name as it appears on Card**

**PLEASE READ:** I understand that my completed registration form and credit card payment must be received by 5 p.m. four (4) days prior to class date to ensure acceptance. Payments made by check must be received NO LATER than 7 days prior to class to ensure processing. No walk-in registrations accepted on day of class. No refunds will be issued unless class is cancelled by MD PTAP.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_