



CIMS ISSA Certification Expert Workshop

November 10, 2009

University of Georgia Center for Continuing Education
1197 South Lumpkin Street
Athens, GA 30602
800-488-7827

REGISTRATION FORM

___ I would like to attend the CIMS Certification Expert Workshop (Registration Fee: \$895)

___ I would like to attend the CIMS Certification Expert Workshop and am an ISSA member

NAME _____

COMPANY _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ FAX _____

E-MAIL _____

For Multiple Attendees, Please Duplicate This Form

METHOD OF PAYMENT

___ My check or money order is enclosed in the amount of \$_____.

___ Please charge my credit card: American Express Visa MasterCard

Card #: _____ Exp. Date: _____

Signature: _____

PLEASE FORWARD YOUR REGISTRATION & PAYMENT TO:

ISSA
7373 N. Lincoln Ave., Lincolnwood, IL 60712-1799
800-225-4772 (North America) or 847-982-0800 • Fax: 847/982-1922
E-mail: daniel@issa.com • Website: www.issa.com

