



PAHMA 2024 FALL CONFERENCE

OCTOBER 10th - 11th, 2024

Seven Springs Mountain Resort & Convention Center

OFFICE USE:

- Member
- A/R
- Tracker
- Confirm

PAYMENT REMITTANCE FORM

1. Complete online registration (each attendee)
2. Complete this payment form and return with payment
3. If you added Real Estate CEC, complete & return CEC form
4. If paying for multiple attendees, include a copy of this form for EACH ATTENDEE (if paying by credit card, you may enter the credit card info only once with the grand total for all attendee remittance forms)

Mgmt Company _____

Attendee Name _____

PAHMA MEMBERS	
<input type="checkbox"/>	\$395 Thru 9/16
<input type="checkbox"/>	\$65 CEC (7 hours) Thru 9/16
<input type="checkbox"/>	\$35 CEC (3.5 hours) Thru 9/16
<input type="checkbox"/>	\$155 Add Guest (meals only)
<input type="checkbox"/>	\$445 After 9/16
<input type="checkbox"/>	\$75 After 9/16 CEC (7 hours)
<input type="checkbox"/>	\$45 After 9/16 CEC (3.5 hours)
TOTAL DUE: <input type="text"/>	

← OR →

**DISCOUNT RATE IF
PAYMENT
RECEIVED BY 9/16**

Prices increase
September 17th

NON-MEMBERS	
<input type="checkbox"/>	\$545 Thru 9/16
<input type="checkbox"/>	\$75 CEC (7 hours) Thru 9/16
<input type="checkbox"/>	\$45 CEC (3.5 hours) Thru 9/16
<input type="checkbox"/>	\$155 Add Guest (meals only)
<input type="checkbox"/>	\$595 After 9/16
<input type="checkbox"/>	\$85 After 9/16 CEC (7 hours)
<input type="checkbox"/>	\$55 After 9/16 CEC (3.5 hours)
TOTAL DUE: <input type="text"/>	

UPDATED CANCELLATION POLICY: A credit or refund, less a \$50 cancellation fee, will be issued if a written request is received at least 15 days prior to event. After this date, fees are nonrefundable. A substitute may be sent in place of registrant. Send written request to: PAHMA, PO BOX 486, Oakmont, PA 15139 or email info@pahma.org

FOR YOUR COMFORT: Since room temperatures are difficult to regulate to everyone's satisfaction, layered clothing is strongly recommended

EVENT ETIQUETTE: All attendees are required to abide by the Event Etiquette and Standards of Behavior Policy which can be found on our website

IN THE EVENT OF SPEAKER CANCELLATION: PAHMA reserves the right to substitute the speaker/topic and/or reschedule the training

FOR CHECKS: Make Payable to PAHMA and send to: PO Box 486, Oakmont, PA 15139-0486

FOR CREDIT CARD: Complete below & **EMAIL** (secure VPN) to info@pahma.org or direct **FAX** to Marianne at (412) 927-2631

Total amount of charge: \$ _____

Name as it appears on the card: _____ Card #: _____

Expiration Date: _____ CVC Code: _____ Billing ZIP Code: _____

Email Address for Receipt: _____