

REGISTRATION FORM

M.P.C.E., 250 Prospect Street, Midland Park, NJ 07432

NO REFUNDS WITHIN 5 DAYS PRIOR TO FIRST CLASS

Phone: 201-444-2030 Fax: 201-444-2091

Make checks payable to: "M.P.C.E."

Cash _____ Check _____ Visa _____ Master Card _____ Amount _____ Today's Date _____

Visa/Master Card Acct. # _____ Exp. Date _____

CVV Code (last 3 digits on back of card) _____

Signature (if paying by credit card) _____ Date of Birth _____

Name _____ E mail address _____

Address _____ Town/Zip _____

Home Phone _____ Bus.Phone _____ Cell Phone _____

Course # _____ Course or Trip Title _____ Date of Trip/Course _____

Fee _____ #of Tickets _____ Meal Choice _____

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