## 2020 NATIONAL ELECTRICAL CODE SEMINAR

## **FAX or MAIL-IN REGISTRATION FORM**

\$359 - Early Bird Registration {Postmarked before January 1st, 2022}

\$399 - Standard Registration {Postmarked by March 14th, 2022}

Firs	st Name:	La	st Name:	
Со	mpany:			
Email: Phone Number:				
Ad	dress:			
Cit	y:	S	itate:	Zip:
	e you a member of CECA (Charlesto you need North Carolina electrician		sn)? 🛘 Yes 🗖 No	
	If Yes what is the exact name on you	r NC license?		
	What is your NC license number?	)	What are the l	ast 4 digits of your SSN?
Do	you need Georgia electrician CEU's	s? □ Yes □ No		
	If Yes what is the exact name on you	r GA license?		
	What is your GA license number?	)	What are the l	ast 4 digits of your SSN?
Do	you need Sorth Carolina inspector	CEU's? ☐ Yes ☐ No		
	If Yes what is the exact name on you	r SC license?		
	What is your SC LLR number?			
	you have any food allergies/needs? If yes, please describe your food alle			
	you have any ADA needs?		e you:	
M	erchandise			
	NFPA 2020 National Electrical Code (NEC) Handbook, Softbound - \$89 each x =			
	NFPA 2020 National Electrical Code (NEC) Handbook Self-Adhesive Index Tabs - \$16 each x =			
Ca	ncellation Policy and Releas	e Waiver – please check t	that you have read a	nd agree to the terms below:
	Seminar Cancellation Policy A \$25 fee will be charged for any cancellations made by March 14, 2022. After March 14, 2022, cancellations will be refunded at 50%.			
	Crowd Notice/Release Please be aware that by attending this event, you consent to your voice, name and/or likeness being used, without compensation, in all media, whether now known or hereafter devised, for eternity, and you release Atlantic Coast Electric Supply, its successors, assigns, subcontractors and licensees from any liability whatsoever of any nature.			
Н	w would you like to pay	TOTAL:		
If y	ou would like to register more than o ou register 3 or more guests, you wi	one person, please complete		for each person.
	By Check (made payable to EPIC Meetings) On your ACES commercial account – please provide your account number: On Credit Card			
	Name:	Card N	Number:	
	Expiration Date:	Month/Year:	CVV:	
	Billing Address:			
	City:	State:	Zip:	

FAX TO: 877-830-8129 MAIL TO: EPIC Meetings, 21279 Victorias Cross Terrace, Ashburn, VA 20147

Questions? Call Joan Davis 703-403-7119 • EPICMeetings@aol.com