

Continuing Enrollment Form

Please complete the following & return to me

@ claudiacauley@ymail.com

**If using Zoom - Mail payment to
REPEG: 884 Allen Dr., Northville, MI 48167.**

Name _____ (as Licensed)

ID# - SP 6501 _____ **Principal AB 6502** _____,

Non-Principal AB (6506) _____, **Individual Broker (6504)** _____

Class Date _____ **Zoom Class? Y. N.**
(circle one)

REPEG **yes** **no** **OR**

**Name of
Company** _____

Email Address: _____

Last 4 of Social Security # _____ **Cell Phone #** _____

NRDS # to submit to NAR/Code of Ethics credit: _____

Method of Payment _____ |
_____ **Check mail to REPEG 884 Allen Dr. Northville, MI. 48167**

_____ **Pay via PayPal**

NOTE:

A date sensitive invitation to the zoom class will be sent to you.

**If, for some reason, you do not receive invitation and CE Book by
morning of day before class, please email me at**

claudiacauley@ymail.com so I can correct the problem.