

A COMPLIANCE TRAINING REGISTRATION FORM

(PLEASE TYPE OR PRINT CLEARLY)

A maximum of three attendees may be enrolled on each registration form. Please complete separate registration forms for each use date. **Completed registration forms must be emailed to <u>AMSTraining@ihda.org.</u>**

Name:				
Email:				
Property Name:				
IHDA #:				
Address:				
City:				
State:			Zip Code:	
Phone Number*:	*Dlease enter only nume	ovic values in this field		
Management Company:	*Please enter only nume	eric values in this field		
Check Applicable:	Site Staff	Management Staff	Other:	
Enter training dates and check courses you wish to attend:				
1) Section 811/SRN	At IHDA \$65	Webinar \$55	Training Date:	
2) Other Programs	At IHDA \$65	Webinar \$55	Training Date:	
3) Section 8/236	At IHDA \$65	Webinar \$55	Training Date:	
4) Tax Credit	At IHDA \$65	Webinar \$55	Training Date:	

^{*}A valid email address is required to ensure timely receipt of important information, including training materials.