



## ACOW 2019 Spring Conference Registration Form

\*NAME:

\*ADDRESS:

\*PHONE:

\*EMAIL:

<input type="checkbox"/>	2 Day Event	\$349	Credit Card Number	<input type="text"/>
<input type="checkbox"/>	Thursday Only	\$189	Expiration Date	<input type="text"/>
<input type="checkbox"/>	Friday Only	\$189	CVC Number	<input type="text"/>
<input type="checkbox"/>	Add Guest Dinner	\$48	Billing Address	<input type="text"/> <input type="text"/>

Signature

### Pay by Check

Total Amount  \$

Check Number

By signing this form I authorize ACOW to share the above credit/debit card the amount stated (total amount). This is a onetime authorization.

### \*Required

Conference Dates – May 16<sup>th</sup> and May 17<sup>th</sup> 2019

Location – Spokane Club, 1002 W Riverside, Spokane, WA 99201

Reservations – 509-838-8511 – Ask for the ACOW room block

**Mail Check or money order payable to Appraisers Coalition of Washington to: PO Box 2299, Port Orchard, WA 98366.** You may also bring this registration form with check, money order, or cash on the day(s) of the event.

**One Registration Form Per Attendee Please**

You can fill out the form using PDF Fill and Sign Mode or print, fill out, and send. Please sent form to PO Box indicated above. If you have questions please email [info@acow-wa.org](mailto:info@acow-wa.org). or call 206-622-8425.