

Registration Form
ARCI Conference March 16 to 19, 2018
EXPANDING INTO RENEWAL
 Charleston, SC

Name: _____ HM Phone: _____ Cell Phone: _____

Mailing Address: _____

E-mail Address: _____

Registration	Date	Price	Total
ARCI Conference Full 4 day package	Mar 16 - 19	\$700.00	
ARCI Conference Main Conf 2 day	Mar 17 - 18	\$350.00	
Pre Conference	Mar 16	\$175.00	
Post Conference Continuing Ed	Mar 19	\$175.00	
Single day of your choice		\$175.00	
Consultants Membership	Annual	\$150.00	
Membership	Annual	\$79.00	

Total: \$ _____

Check all that apply: I am an ARCI member

- Members receive 10% discount on all fees.

Meals: If you have special dietary requirements, please contact main office.

Please remit fees in US Dollars only. You may pay via PayPal akashiclove7@gmail.com or make check or money order payable to **ARCI** or fill out the credit card information below and return this registration form with payment to:

ARCI Business Office, PO Box 61862, N. Charleston, SC 29419
 Phone 843 - 991 - 0831 www.learnakashirecords.com

Please bill my credit card:

Card# _____ Exp: _____ Zip Code: _____

Signature: _____

I consent to be photographed or videotaped during conference to be used for ARCI materials only.

Signature: _____