PROFESSIONAL CERTIFICATE PROGRAM Community Engagement Special Enrollment

Please complete this enrollment form and return it with the special \$60 discounted nonrefundable enrollment fee to NeighborWorks America at the address below. Please complete all blanks (use N/A if a section does not apply) and please print. Enrollment cannot be processed without payment.

Mr. Mrs. Mx Full Nan	ne:				
Position/Title					
Organziation					
Organization Address _					
City/State/Zip ——					
Phone ——					
Office Email					
Alternate Email (optiona	(lr				
Which sector do you rep	oresent?	O Public	O Priv	ate	O Nonprofit
Are you affiliated with a	Neighbo	rWorks organiza	ation? () yes	O no
PAYMENT INFO	RMATI	ON			
Professional Certificate en nonrefundable fee per pro	rollments v		ssed withou	ut the special re	educed \$60
For Check Payments: O Check enclosed.	Check nui	mber	(r	payable to Neig	hborWorks America)
Please return this form and the \$60 enrollment fee to Neighborhood Reinvestment Training, P.O. Box 418630, Boston, MA 02241-8630. (This is a P.O. Box and cannot receive FedEx Shipments.)					
For Credit Card Payments: O I would like to pay by We will send an e-invoice enrollment within two (2) books are properly@elevan.com.	credit care payable o	nline to the emo			. •
Email address for person p If paying by credit card, e					
For more program informa	ition or cus	tomer support, p	olease call	(800) 438-5547	or email



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