



National Association of Independent Fee Appraisers

NorCal Northern California Chapter

CLASS REGISTRATION SHEET

Class: _____ Date: _____

Name (print): _____

Appraiser License # _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____ Fax: _____

NAIFA Member: Yes/No Member # _____

Method of payment: Check Credit card: Visa Master Card Discover Card

Credit Card Information: Account number: _____

Expiration date: _____

Name on Card: _____ Amount: \$ _____

Signature: (needed for credit card payments): _____