

# PARTICIPANT REGISTRATION FORM: HCV PBV

Host: HA of the city of Dothan, AL

**Monday-Wednesday October 7-9**

**171 Hospitality Lane Dothan, AL 36303**

*Hilton Garden Inn available lodging block: \$139/night +taxes  
Book rooms at (334)671-7676  
Last date at special rate 09/22/2019*

## Registration Details

First Name: ..... Last Name: .....  
Position: .....  
Organization/Company: .....  
Address: .....  
City: ..... State: ..... Zip Code: .....  
Phone: .....  
Email: .....

If special accommodations are needed, please call a member of the DHA team at (334)794-6713.

## Registration Fee

*The registration fee includes workshop material, exam, coffee breaks and lunch daily.*

	Class		Number Registered	Test- (optional)		Number to take test	Total Payment
Registration Fee	<input type="checkbox"/>	\$600.00		<input type="checkbox"/>	0.0		
Total Payment for all participants							

## Cancellation Policy

*All cancellations must be in writing. Cancellations within 15-days of training will not be refunded. The agency can substitute an attendee if the original registrant cannot attend.*

**Payment: Make Checks Payable to Housing Authority of the City of Dothan, AL**

## Registration and Questions:

Maggie Perez  
Housing Authority of the City of Dothan, AL  
(334)794-6713 ext 104  
mperez@dothanhousing.org