

REGISTRATION FORM



TO COMPLETE REGISTRATION, you will need to list your name and qualifier number as it appears on the North Carolina Licensing Board for General Contractors website, <https://nclbgc.org/qualifier-search/>.

IN ACCORDANCE WITH NCLBGC:

- This class requires an identification check at check-in: NCBI requires a picture ID (valid state or federal ID preferred).
- Registrants are required to be present for the entire duration of the course to receive NCLBGC Continuing Education Credit.

****Lunch and snacks will be provided****

First Name: _____ Last Name: _____

Company: _____

Billing Address: _____ City / State / Zip: _____

Phone: _____ Email (required): _____

Local HBA: _____ Member Pin #: _____ NCLBGC Qualifier # _____
(if applicable) (if applicable)

CONTINUING EDUCATION CLASSES

Classes will be held at *Tabernacle Baptist Church, 1815 Airport Blvd., Wilson NC 27896*

DATE / START TIME	COURSES	LENGTH	HBA Member Rate	Non Member Rate
<input type="checkbox"/> Wednesday, Sept. 20, 2023 <small>Instructor: Steve Monroe</small>	M2023 NCLBGC Mandatory Course	2 hr.	<input type="checkbox"/> \$185	<input type="checkbox"/> \$215
	MK106 Effective Marketing Strategies for New Construction	2 hr.		
	PM304 Building Quality Relationships with Trade Contractors	4 hr.		
✓CHECK ONE				
<input type="checkbox"/> Wednesday, October 25, 2023 <small>Instructor: Rusty Kling</small>	M2023 NCLBGC Mandatory Course	2 hr.	<input type="checkbox"/> \$185	<input type="checkbox"/> \$215
	PM209 The Ins and Outs of Flipping Houses	2 hr.		
	BM206 Remodeling: The Bad and the Good Strategies for Success	4 hr.		
✓CHECK ONE				
<input type="checkbox"/> Wednesday, Nov. 8, 2023 <small>Instructor: Wallace West</small>	M2023 NCLBGC Mandatory Course	2 hr.	<input type="checkbox"/> \$185	<input type="checkbox"/> \$215
	BM212 Exit Strategy	2 hr.		
	CS102 Selling Service Excellence	4 hr.		
✓CHECK ONE				

FOR REGISTRATION CUT OFF DATES
 Email HBAofWilson@gmail.com or call 252 885 8695

OFFICE USE ONLY

Date Paid: _____

Check #/CC: _____

Amt Paid: _____

Paid By: _____

Registration Total: \$ _____

To pay by check:
 Mail check and form to: HBA of Wilson, PO Box 7011, Wilson NC 27895

To pay by credit card:
 Click [here](#) (use "1111" as invoice number) and email form to hbaofwilson@gmail.com, or fax to 252-991-5736.

Office address: 2801 Nash St., Suite D, Wilson NC