

# 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
			✓CHECK ONE	
<input type="checkbox"/> <b>Wednesday, Sept. 20, 2023</b> Instructor: Steve Monroe	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"/> <b>Wednesday, October 25, 2023</b> Instructor: Rusty Kling	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"/> <b>Wednesday, Nov. 8, 2023</b> Instructor: Wallace West	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.		

**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