

PFDA'S WRAP-UP PROGRAM

REGISTRATION FORM

**Fill out your Registration TODAY and email or fax it back to PFDA, to register by
Tuesday, January 16, 2018**

- ❖ Email to: donna@pfda.org
❖ Fax to: (717) 545-7360 ❖ Call: 800-692-6068

Name(s): _____

Funeral Home: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Email Address: _____

January 23, 2018
9am-4pm

Registration Fees:

PFDA Member Firm - \$150.00 for each licensed funeral director

Non-PFDA Member Firm – \$150.00 per credit hour for each licensed funeral director

Please check number of CE credits needed: 1 2 3 4

Please check if you need child abuse CE: 2

Payment: Check (Please make payable to PFDA) – 7441 Allentown Boulevard, Harrisburg, PA 17112

Credit Card: (circle one) American Express Visa MasterCard

Credit card number _____ Exp. Date _____

Print name as it appears on credit card _____

Credit Card Billing Address _____

Signature _____ Security # _____

(last 3 digits on card's signature panel)