



www.effectivemediationconsultants.com

Advanced Negotiation & Mediation Seminar 8hr CME/CLE

(FLORIDA BAR APPROVED CLE renewal applied for)

REGISTRATION FORM

Print Full Name: _____
(PRINT CLEARLY, as you would want it to appear on your certificate)

Address: _____ City: _____
State: _____ Zip: _____

Daytime Phone: _____ Other Phone: _____

Email Address _____

Profession: ___ Attorney ___ Psychologist ___ LCSW/LMHC/LMFT ___ Mediator
___ Other: _____ License #: _____ Highest Degree Earned: _____

Month of Training Being Requested: ___ Sat., Nov. 18, 2023, ___ Sat., Dec. 16, 2023, Jan. 2024 TBA

I plan on Attending ___ LIVE online ___ Purchase the Recording

NEED MORE CMEs OR SKILLS!! CME RECORDINGS ARE AVAILABLE (contact me):

COST: \$280 (per hour pricing available)

3 Ways to Pay: 1) ___ Check; 2) ___ Visa ___ MC ___ AmEx ___ Discover; 3) ___ Send Online Link
** CHECK PAYMENT OPTION. **Note: All checks make payable to **Effective Mediation Consultants, LLC**

Print Your Name as appears on card: _____

Credit Card # _____

Security Code/CVV _____ **Exp. Date** _____ **Billing Zip Code:** _____
(Amex – 4 digits on front, MC/Discover/Visa – 3 digits on back)

Cardholder Signature: _____

Date: _____ Amount to be charged: _____

Do you require any special accommodations due to disability? ___ NO ___ YES

Accommodation Required: _____

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Payment options: (choose the best option)

- 1) Mail form and payments to: **Stanley Zamor**; 7958 Pines Blvd. #235; Pembroke Pines, FL 33024
- 2) Credit/Debit: email form to: zamorADRExpert@gmail.com in the subject line [date of training]
(you will be emailed an electronic payment receipt)

Email: szamor@EffectiveMediationConsultants.com Tel: (954) 261-8600