

MEMBER
CERTIFICATION WORKSHOP REGISTRATION FORM
American Society of Professional Estimators

NAME: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

WORK PHONE: _____ HOME PHONE: _____ EMAIL: _____

CHAPTER NAME: _____ CHAPTER NUMBER _____

MAL: _____ REGION: _____

SIGNATURE: _____ DATE: _____

Signature of Registrant

CONSTRUCTION ESTIMATING DISCIPLINE NUMBER(S)

Primary: _____ Description: _____ Years Experience: _____

*Registrant must submit Workshop Registration Form to the Chapter Certification Chair or Society Representative no later than **October 1st**. Registration must be signed by Chapter President, Chapter Certification Chair, Regional Certification Board Member or Regional Governor in order to be processed. On-line applicants submit directly to the SBO, without signatures.*

\$75.00 Fee for Workshop taken at the Chapter; **\$125.00** Fee for the On-line Workshop (On-line cost includes the GEK Study Guide), all fees are in US currency and are Non-refundable.

Fee Enclosed _____ CHECK # _____

**Make checks payable to ASPE and mail to the Administrative Office at:
2525 Perimeter Place Drive – Suite 103, Nashville, Tennessee 37214**

VISA

MASTERCARD

AMERICAN EXPRESS

Card # _____ EXP. DATE: _____

*The cost for the Certification General Estimating Knowledge (GEK) Exam and Discipline Specific (DST) Test is an additional Two Hundred Seventy Five Dollars (**\$275.00**). Additional Fees may be assessed by each Chapter.*

SIGNATURE: _____ DATE: _____

Signature of Society Representative

**Society Representative must submit Workshop Registration Form
to Business Office no later than October 15th.**