

**South Carolina Fall Seminar 2006**  
**Registration Form**

Name(s): \_\_\_\_\_  
\_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Seminar Fee:**

Agent and Employees: No fee

Non-Agents \$100.00

Make check payable to: The Security Title Guarantee Corporation of Baltimore

No refunds will be issued unless notice of cancellation is received 48 hours prior to the seminar.

**The Capital City Club Dress Code requires appropriate business attire during operating hours and the Club has a No-Smoking Policy for the facility.**

Five hours of CLE credits (4 hours of general and 1 hour ethics) applied for:  
APPROVAL PENDING