

**BCRA Real Estate Training
Registration form for Michigan
Pre-License Training Course**

Upon successful completion of this course you will be qualified to sit for the Michigan Real Estate Licensing Exam. This course will help you understand what is needed to know to take the exam and will leave you with a basic knowledge of real estate principals, law, and fair housing.

Class is held evenings from 5:30 - 9:30 every Monday and Wednesday beginning September 30th through November 4, 2019.

**To successfully complete this course attendance is
MANDATORY at all sessions**

*The percentage of students that successfully
completed this Real Estate Pre-License Training
(Salesperson) for calendar year 2018 is 100%*

Cost: \$450 (*includes all materials*)

Location: Commerce One Building, 901 Saginaw St.,
Bay City, MI 48708 (*corner of 5th and Saginaw*)

For more information call:
989-892-8541 (*Monday-Friday 8:30 – 4:30*)
or Email: bcra.ret@gmail.com (*anytime*)

**All fees are payable prior to the beginning of class and
are non-refundable**

SUBMIT PAYMENT TO:

Bay County REALTOR® Association

901 Saginaw St.

Bay City, MI 48708

989-892-8541

Pre-License Training Course Registration Form

September 30 – November 4, 2019

I hereby submit the following information to register for the above mentioned course:

Name: _____
(Please Print)

Home Address:

Street

City

State

Zip Code

Contact Information

Email Address: _____

Phone: _____

Email completed application to:

BCRA.ret@gmail.com

Deliver or Mail to:

Bay County REALTOR® Association

901 Saginaw St.

Bay City, MI 48708

Bay County REALTOR® Association (BCRA)

Phone: 989-892-8541 Fax: 989-892-8585

Email: bcra.ceo@gmail.com

**Credit Card Payment Authorization for
Real Estate Fundamentals Class**

Date: _____

I hereby authorize the Bay County REALTOR® Association (BCRA) to use the following credit card for:

Payment in the amount of \$_____, to be applied as registration fee for Real Estate Fundamentals class offered by BCRA Real Estate Training.

Credit card number (*Master Card or Visa only*): _____

Exp Date: _____ Security Code (*3 digits on back of card*): _____

Street **Number** card is issued to: _____ Zip Code card is issued to: _____

Name on Card: _____

Signature of Cardholder: _____

(Either digital signature or print/sign then fax to 989-892-8585)

Please Note: A 2.5% processing fee will be charged on the amount of the payment.

Due to the confidential credit card information requested on this form

PLEASE

DO NOT EMAIL THE COMPLETED FORM

PLEASE, either fax (989-892-8585), send by First Class Mail, or deliver to:

Bay County REALTOR Association (or BCRA)

901 Saginaw St.

Bay City, Michigan 48708