

Date:

Friday—April 23, 2010

Cost:

NAHB Member: \$59  
NON-NAHB Members: \$99

Time: *Choose One*

4/23/10: 1:00 pm-4:00 pm

PLEASE CHECK ONE ONLY

**IMPORTANT NOTE:**

**The three 1-hour modules being presented during this seminar have been approved by the State of Michigan for *EXPERIENCED BUILDERS* who became licensed prior to January 1, 2009 to obtain credit for required Continuing Education**

**Any licensed builder may take this seminar; however, priority will be given to those who became licensed before January 1, 2009 and whose builder's license will expire in May, 2011.**

3040 Sunset Lane  
Traverse City, MI 49684  
**Phone:** 231.946.2305  
**Toll Free:** 800.422.5166  
**Fax:** 231.946.1051  
**Email:** mailbox@hbagta.com  
**Web Site:** www.hbagta.com



GRAND TRAVERSE AREA, INC.

**COMMITMENT TO EXCELLENCE**

# Home Builders Association of the Grand Traverse Area, Inc. Professional Development Center

2010 EDUCATION SERIES PRESENTS

## Continuing Education Seminar for EXPERIENCED Builders

PRESENTED BY: BRUCE FROST, MBA, NAHB/DDL

Continuing Education is now required for all licensed builders in order to renew their license. This seminar has been created especially for those EXPERIENCED BUILDERS who became licensed prior to January 1, 2009. This seminar will fulfill your Continuing Education requirement for the license cycle ending May 31, 2011.

During the seminar, the following mandatory topics will be presented in three 1-hour modules:

- ◆ Safety
- ◆ Codes
- ◆ Legal Issues

The seminar will be held at the Home Builders Association of the Grand Traverse area located in Traverse City on ~~Thursday, April 22nd from 6:00–9:00 pm~~ or ~~Friday, April 23 from 9:00 am to 12:00 pm~~ or 1:00 pm to 4:00 pm.

***OPENINGS ARE ONLY AVAILABLE ON FRIDAY, APRIL 23 FROM 1-4 pm***

**Pre-registration with payment is required.  
Seating is limited to 24 attendees per session.**

**REGISTRATION**

Name _____		Amount Due \$ _____
Address _____		<b>Method of Payment</b>
Company _____		<input type="checkbox"/> Check # _____
E-mail address _____		<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
Phone _____		Credit Card # _____
Local Association _____		Expiration Date / V Code # _____
		Signature _____