

**CE Classes - Live Online Instructor Classes via Zoom**

<b><u>MANDATORY and ELECTIVE CLASSES</u></b>	<b><u>Dates</u></b>	<b><u>Day</u></b>	<b><u>Time</u></b>	<b><u>Cost</u></b>
<i>Check the box of the class to register</i>				
<input type="checkbox"/> Brokerage Relationship & Disclosure – 3 hrs	06/22	Sat	8:00 a.m. – 11:00 a.m.	\$30.00
<input type="checkbox"/> Negotiation – with clients – (Elective – 3 hrs)	06/22	Sat	11:45 a.m. – 2:45 p.m.	\$30.00
<input type="checkbox"/> Maryland Fair Housing – 1.5 hrs	06/22	Sat	3:00 p.m. – 4:30 p.m.	\$15.00
<input type="checkbox"/> Maryland Ethics – 3 hrs	06/23	Sun	8:00 a.m. – 11:00 a.m.	\$30.00
<input type="checkbox"/> Working w/Sellers (Elective 1.5 hrs)	06/23	Sun	11:45 a.m. – 1:15 p.m.	\$15.00
<input type="checkbox"/> Maryland Legislative – 3 hrs	06/23	Sun	1:30 p.m. – 4:30 p.m.	\$30.00

**15 Hours required to renew license.**

**Zelle** – ReedTrainingCenter@gmail.com - Georgetown SANA, LLC  
**CashApp** – \$ReedTrainingCenter1  
**Check** – Mail to office address: See Below  
**Credit Card** - 4% processing fee on the total

**Email registration form: [ReedTrainingCenter@gmail.com](mailto:ReedTrainingCenter@gmail.com)**

**AGENT REGISTRATION INFORMATION**

MD License Number: \_\_\_\_\_ Company Name: \_\_\_\_\_

Name of Agent: \_\_\_\_\_ **Total Amount Due:** \_\_\_\_\_

Agent Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**CREDIT CARD AUTHORIZATION**

Type of Card:    Visa       MasterCard       American Express       Discover  

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Security Code: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_ Date: \_\_\_\_\_

Email: [ReedTrainingCenter@gmail.com](mailto:ReedTrainingCenter@gmail.com)      Office : 240-293-6393      Website: [www.ReedTrainingCenter.com](http://www.ReedTrainingCenter.com)

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