

# LBAR CLASS REGISTRATION FORM

## Lexington-Bluegrass Association of REALTORS

2250 Regency Road  
Lexington, KY 40503  
859-276-3503  
859-277-0286 - FAX

### TO REGISTER FOR A CLASS AT LBAR PLEASE FILL OUT THE FOLLOWING:

**\*\* A student is not permitted to miss more than ten (10) minutes in any three hour continuing education session. You will not be admitted into the class if you are ten (10) minutes late.**

NAME OF CLASS: \_\_\_\_\_ DATE OF CLASS: \_\_\_\_\_

Name (*print as on license*) \_\_\_\_\_

Nickname (*for badge*) \_\_\_\_\_ RE Lic # \_\_\_\_\_ Last 4 digits of SS# \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Name of firm \_\_\_\_\_

Mailing address (*for confirmation and grade notification*) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (*to reach you during normal business hours*) (\_\_\_\_\_) \_\_\_\_\_

Name of your primary local Board/Association \_\_\_\_\_

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**KY CORE COURSE IS \$75 / 3 HOUR CE CLASS IS \$35**

#### METHOD OF PAYMENT

Check for \$ \_\_\_\_\_ made payable to **LBAR**

**OR**

Charge \$ \_\_\_\_\_ to my: (*check one*)  **Visa**  **MasterCard**  
 **Discover**  **American Express**

*If paying by credit card, please provide the following credit card information:*

Card number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

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

Signature of cardholder (*required*) \_\_\_\_\_

House # and zip code where credit card bill is sent (*required*) \_\_\_\_\_

Janice Yonts

Education Director - LBAR

[janice@lbar.com](mailto:janice@lbar.com)

859-276-3503

CANCELLATION POLICY: For regular CE class – 48 hour notice to cancel with a full refund. For Designation Classes - Full refund two (2) weeks prior to course date. No refund if less than two weeks notice to cancel. If not able to attend, a substitute may take your registration upon notification to the Education Director. LBAR reserves the right to cancel courses due to lack of registration to cover course costs – Must have 25 in most classes.