

REGISTRATION FORM

WISCONSIN LAND TITLE ASSOCIATION
PREPARATORY SEMINAR FOR THE STATE OF
WISCONSIN INSURANCE
TITLE AGENT LICENSING EXAM

2010 Final Seminar

October 19, 2010

6767 W. Greenfield, West Allis

WLTA Members \$75

Non Members \$150

Name: _____

Company: _____

Address: _____

City, State and Zip Code: _____

Telephone: _____ Fax: _____

Email: _____

*It is very important that you give us your email address so we can send you confirmations
& important details.*

Fee Enclosed:	Seminar:	Members	\$75	_____
		Non Members	\$150	_____

Please return this completed form along with your check for appropriate fee to:

Wisconsin Land Title Association
P.O. Box 873 West Salem, WI 54669
608-786-2336 Phone 608-786-2356 Fax
kgilster@wlta.org www.wlta.org