Copenbarger Access Membership Application Form

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ At Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am interested in the Access Program but have questions; please contact me with information.

Sign me up for the Access Program today. (Please complete the information below.)

**Seminar Discount Payment Plan (check one)**

1 Payment -- Paid in full on \_\_\_\_\_\_\_\_\_\_\_\_\_ (date)

2 Payments, 30 days apart (to nearest business day), no interest if paid on time

1st Payment of $1800.00 taken: \_\_\_\_\_\_\_\_\_\_\_\_ (date)

2nd Payment of $1800.00 taken on \_\_\_\_\_\_\_\_\_\_\_\_\_ (30 days from 1st payment)

4 Payments, 30 days apart (to nearest business day), no interest if paid on time

1st Payment of $900.00 taken: \_\_\_\_\_\_\_\_\_\_\_ (date)

2nd Payment of $900.00 taken on \_\_\_\_\_\_\_\_\_\_\_\_\_ (30 days from 1st payment)

3rd Payment of $900.00 taken on \_\_\_\_\_\_\_\_\_\_\_\_\_ (30 days from 2nd Payment)

4th Payment of $900.00 taken on \_\_\_\_\_\_\_\_\_\_\_\_\_ (30 days from 3rd Payment)

Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Please make check out to *Copenbarger & Copenbarger, LLP*

Credit Card Type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Internal Use Only:**

Initial Payment Amount $\_\_\_\_\_\_\_\_\_\_\_\_ taken by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_

Payment submitted on \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_ by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_