



Passaic County Board of REALTORS®

204 Berdan Avenue
Wayne, New Jersey 07470-3240
(973) 305-1100
Fax: (973) 305-1611

Non-Member Class Registration

Name _____

NRDS# _____ License # _____

Email Address _____

Course name and date:

1. _____

2. _____

3. _____

CREDIT CARD AUTHORIZATION

Please Print Clearly

Name	
Name of Company	
Name on Credit Card	
Card Type: Visa / Master Card / Amex	
Credit Card Number	
Credit Card Expiration Date	
CVV Number	
Credit Card Billing Street Address	
Credit Card Billing City and Zip	
Total Amount Being Charged	\$
Phone Number where you can be reached if there is a problem.	

I acknowledge that I understand and authorize the above charges.

Signature: _____

Print Name: _____ Date: _____

I acknowledge that I understand and authorize the above charges and that, once authorized, there will be no refunds or credits given.