

Empowerment Coaching Program
PRACTICAL RESOURCES
Enrollment and Membership Agreement

Print and Fax This Completed Form to **1-760-752-3192**

Please enroll me in the Empowerment Coaching Program. I understand that my membership is for a minimum of six-months and that my involvement in the Coaching Program will not be contingent on any assumed results that I may derive from the Coaching Program. I understand that my success in real estate is entirely based on my own efforts and skills, and therefore do not hold the Empowerment Coaching Program and/or Practical Resources responsible for the anticipated growth of my business.

Name (please print) _____

Company _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

Office Phone _____ **Cell** _____ **Fax** _____

E-mail Address (print carefully) _____

Select choice of fees:

6 monthly payments of \$119.00 per month beginning _____

A one-time \$595.00 payment in full beginning _____

(By paying the one time fee, I understand that I am essentially paying for five months and receiving one additional month for free.)

Please charge my fee on the following credit card:

Account # _____ Expiration date: _____

I authorize **Practical Resources** to charge the fee as chosen above to my credit card. I agree to the terms and conditions of the membership above.

Signature _____ Today's date _____



Practical Resources
2588 El Camino Real, Suite F-197, Carlsbad, CA 92008
phone: **1-760-752-1709** fax: **1-760-752-3192**