



Association of Workers' Compensation Professionals

PO Box 760
Rancho Cordova, CA 95741-0760
916.290.8017 (phone)
916.914.1706 (fax)
www.awcp.org

AWCP Announcement Center Payment

Announcement Costs

AWCP Members \$50 per month (3 months for \$125)
Non members \$75 per month (3 months for \$200)

Criteria

Announcements must be submitted camera ready. No changes will be made to the text. Please submit this form with announcement.

Name: (Please print) AWCP Member: Yes No
Company: Phone No.
Address: Email Address:
Check Enclosed: Yes No Amount:
Payment Information: Visa M/C AMEX Charge Amount:
Name (as it appears on credit card):
Credit Card Number:
Expires: Security Code: Billing Zip Code Number:

Mail, Email or Fax this form with payment to:

AWCP

PO Box 760 ~ Rancho Cordova, CA 95741-0760
Phone: 916.290.8017 ~ Fax: 916.914.1706
connie@awcp.org www.awcp.org