

ATLANTA BAMI-I CTAM WORKSHOP
REGISTRATION FORM

COMPANY INFORMATION: Please print or type. Form may be copied for more participants.

Company Name _____

Company Address _____

City _____ State _____ Zip Code _____

Business Phone _____ Fax _____ Cell _____

Name _____ Position _____

Email Address _____

ATTENDEE REGISTRATION FEE:

CITY OF ATLANTA DMW ATTENDEE:

The fee includes classroom instruction and all accompanying instruction materials, exams, certificates, light breakfast/lunch/refreshments daily, one social event, discussions and networking opportunities (\$1,000).

\$1,000/person

NON-CITY OF ATLANT DWM ATTENDEE FEE:

The fee includes classroom instruction and all accompanying instruction materials, exams, certificates, light breakfast/lunch/refreshments daily, one social event, discussions and networking opportunities (\$1,300).

\$1,300/person

TOTAL DUE:

\$ _____



PLEASE FAX FORM TO:
(334) 872-9500

NO COVER SHEET NEEDED !

OR

IF CREDIT CARD INFO IS NOT INCLUDED, EMAIL FORM TO:

darlene@engconco.com

OR

MAIL FORM & CHECK TO:

**BAMI-I, P.O. BOX 568
SELMA, AL 36702-0568**

FOR MORE INFO CONTACT:

**TOM ISELEY, Ph.D., P.E.,
Dist. M. ASCE, PWAM**

CELL: (404) 386-5667

EMAIL : dtiseley@latech.edu

WEBSITE: bami-i.com

OR

**KHALID YAMIN, P.E.,
DIRECTOR, STRATEGIC
ASSET MANAGEMENT
DIVISION,**

CITY OF ATLANTA / DWM

PHONE : (404) 546-1307

EMAIL: kyamin@atlantaga.gov

*** BAMI-I IS A 501 (C) 3 NON
-PROFIT CORPORATON.
THE FEDERAL TAX ID
NUMBER IS: 20 2659476**

PAYMENT:

CALL ME FOR A CREDIT CARD NUMBER.

CREDIT CARD:

MASTER CARD **VISA** **DISCOVER**

CARD NUMBER: _____ - _____ - _____

EXP. DATE: ____ / ____ **CARD ZIP CODE:** _____