



Moving Up Management Intensive (MUMI©) Registration Form

Participant's Name: _____

Title: _____

No. of Direct Reports: _____ Email: _____

Organization: _____

Address: _____

City: _____ Zip: _____

Work Phone: _____ Home Phone: _____ Fax: _____

Approving Supervisor: _____

Print Name and Title

Signature

Cost: \$5,500.00

Payment Option: Payment is due at the time of registration.

- Check, made payable to **iMPACT Personal & Professional Dev. Inc.**
Fax or mail Purchase Order to 904.230-7165

This registration form may be copied for additional registrations

REFUNDS: Your written refund request must be received no later than three (3) business days prior to the program. The request must include company F.E.I.D. number and participant's name. A 5% administrative charge is deducted from the program fee. A 30% charge will be deducted if participant withdraws from class 3 months after start of program. No refunds will be given if participant withdraws from the program after 5 months.

**Mail completed registration to: iMPACT Personal & Professional Dev. Inc.
835 Buckeye Lane West, Suite 1
Jacksonville, FL 32259**

For further information please call iMPACT at 904.287-6739
Tax ID: 11-3643107