

Registration Form



MANUFACTURED HOUSING COMMUNITY MANAGER

WMA MCM 2023 Webinar

Tuesday,
July 18, 2023

Register Today!
Limited Space Available!

MCM Webinar: Conflict to Solution — Techniques for the Real World

- Customer Care
- Conflict Resolution

Join us for our informational webinar and learn techniques to resolve conflict, solve the difficult person puzzle, and avoid common customer care mistakes.

You will leave this session with fresh ideas and new tools that can be used in real life situations.

Participants will earn six units of MCM credits. Webinar will be 1.5 hours in duration. All details can be found at wma.org/julywebinar2023.

Register online today!
wma.org/event-registration



Western
Manufactured Housing Communities
Association

Name _____ Email Address _____

Name _____ Email Address _____

Community/Firm _____ Membership # _____

Address _____ City, State _____ Zip _____

Phone Number _____ Fax Number _____

Registration Fees			
Registrations for	Member Rate	Non Member Rate	Sub Totals
July 18	\$129	\$258	\$ _____
		# of Registrants	X _____
		Grand Total	\$ _____

Date: July 18, 2023
Time: 1:00 p.m. – 2:30 p.m.

This webinar will be presented via Zoom. Link will be sent prior to the webinar in a separate email.

Registration Policies: To qualify for member rates, attendees must be either community owners or managers of member communities, work directly for a S&I member or be directly employed by a member management company. Managers or assistant managers directly employed by a non member community, but managed by a member management company, do not qualify for member rates.

No refunds for “no shows.” Please register at least five business days prior to the event. **Confirmations will be delivered via email.**

Please return this form with your check or credit card information completed below.

Confirmations will be delivered via email; course materials will be provided at the seminar. **Protect your financial information — please DO NOT email this form to WMA. Faxing is a secure protocol.**

Check/Money Order Visa MasterCard AMEX Discover

Name on Card _____

Card # _____ Exp _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____ Email Address _____

address 455 capitol mall, suite 800 | sacramento, ca 95814
phone 916.448.7002 | fax 916.448.7085 | email info@wma.org