



FINANCIAL ASSISTANCE FORM

Name _____
Email _____ Phone _____
Name of Program _____ Date of Program _____
CBA Member Number _____
Reason for Assistance _____

TYPE OF PROGRAM

- | | |
|---|---|
| <input type="checkbox"/> Live Event
Event title/date | <input type="checkbox"/> Video Replay
Event Title/Date |
| <input type="checkbox"/> Live Webcast
Event Title/Date | <input type="checkbox"/> Home Study (Video-on-Demand or MP3 download)
Program Title/Format |

Program Tuition _____
Amount I can afford _____

Have you applied for tuition assistance from CBA-CLE in the last year? Yes No

Please explain how this additional program/home study will benefit your practice

If CBA-CLE is able to offer you the requested tuition assistance, you may pay now by credit card or mail a check to the address below.

I'll mail a check I'll pay now—credit card information below

Visa MasterCard AMEX

Card Number _____ Expiration Date _____

Send this form to mrippentrop@cobar.org or FAX to 303-860-0624

Assistance is available at the discretion of CBA-CLE. For additional information or assistance, please call CBA-CLE at 303-860-0608 or 888-860-2531.



1290 Broadway
Suite 1700
Denver, CO 80203



www.cba-cle.org



Call (303) 860-0608
Toll-free (888) 860-2531
Fax (303) 860-0624