

TRAINING COURSE REGISTRATION

Name (registration received from) _____

Home Address _____

City _____ State _____ Zipcode _____

Telephone: Daytime: _____

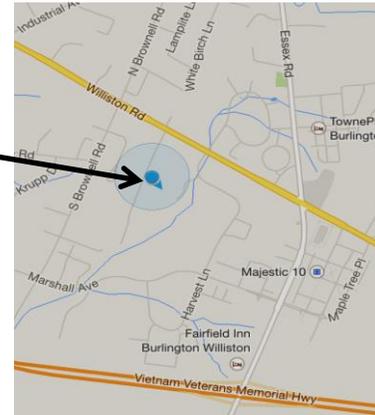
Fax: _____

Email: _____

TITLE OF COURSE: Vermont Essential Maintenance Practice (EMP) Training

DATE(S): Aug. 19, 2014 5:00 pm - 8:00 pm

LOCATION: **Cardno ATC
171 Commerce St.
Williston, VT 05495**



CLASS STARTS PROMPTLY AT 5:00 PM

Number of Attendees: _____

Attendee Names: _____

Tuition per attendee: _____ **60\$** _____

Enclosed is my check for: _____

Total Fee: \$ _____

***10% discount if 4 or more individuals enrolled**

Please make check payable to Cardno ATC. When paying by mail, please send a copy of this course registration with your remittance. Payments are accepted by check (VT bank), credit card, cash, certified bank check, money order or pre-approved purchase order.

- Pre-registration and payment in advance is required.
- Training documentation (certificate) will not be released until payment is received in full.
- Class is subject to cancellation due to low registration, full refund will be provided.