



TRAINING ENROLLMENT FORM (USA)

BASIC INFORMATION:

Student Name

Company Name

Student Address

Company Address

E-Mail Address

Phone Number

COURSE INFORMATION:

Please Check All That Apply:

Cost:

Date Requested:

- | | | |
|--|---------|-------|
| <input type="checkbox"/> MAC Attack Training | \$600 | _____ |
| <input type="checkbox"/> MAC Attack Certified Training | \$1,000 | _____ |
| <input type="checkbox"/> Light Jockey Training | \$500 | _____ |
| <input type="checkbox"/> M-Series Training Basic | \$75 | _____ |
| <input type="checkbox"/> M-Series Training Advanced | \$300 | _____ |

***The course fee is refundable when cancelled up to three days prior to the class (\$50.00 charge).
Failure to attend without notification will result in forfeiture of the full class fee.***

BILLING INFORMATION:

Type of Card:

Card Number:

Security Code:

Exp. Date:

- | | | | |
|-------------------------------------|-------|-------|-------|
| <input type="checkbox"/> Visa | _____ | _____ | _____ |
| <input type="checkbox"/> Mastercard | _____ | _____ | _____ |
| <input type="checkbox"/> AMEX | _____ | _____ | _____ |

Name as it appears on credit card: _____

Credit Card Billing Address: _____

Address: _____

City: _____

State: _____

Zip: _____

Signature of Card Holder: _____

This form must be COMPLETED and returned to Martin Professional 2 weeks prior to the posted class date.

****Only one form per student attending****

Fax the completed form to 954.858.1811 Attention: Training

E-mail inquiries to training@martinpro.com

Martin Professional, Inc. • 1718 W. Mishawaka Road • Elkhart, IN 46517

Phone: 954.858.1800 Fax: 954.858.1811 Internet: www.martin.com