

Customer Contact Info

Company Name: _____

Contact Name: _____

Company Billing Address: _____

Contact Email: _____

Contact Phone: _____

Courses

Course:	Location(Circle):	Price:	Date(s):
<input type="checkbox"/> Introduction To Prolog Manager	Boston / NYC	\$850.00	_____
<input type="checkbox"/> Using Crystal Reports With Prolog	Boston / NYC	\$550.00	_____
<input type="checkbox"/> MC ² ICE Basics	Boston / NYC	\$850.00	_____
<input type="checkbox"/> MC ² ICE Advanced	Boston / NYC	\$850.00	_____
<input type="checkbox"/> Using Suretrak With Prolog	Boston / NYC	\$550.00	_____
<input type="checkbox"/> Using Microsoft Project With Prolog	Boston / NYC	\$550.00	_____
<input type="checkbox"/> Cost Management / Budget	Boston / NYC	\$550.00	_____
<input type="checkbox"/> Purchasing / Procurement With Prolog	Boston / NYC	\$550.00	_____
<input type="checkbox"/> Using P5/Contractor With Prolog	Boston / NYC	\$850.00	_____

List of Students

Attendee Name: _____ Job Title: _____ Email: _____

Attendee Name: _____ Job Title: _____ Email: _____

Attendee Name: _____ Job Title: _____ Email: _____

Attendee Name: _____ Job Title: _____ Email: _____

Attendee Name: _____ Job Title: _____ Email: _____

Attendee Name: _____ Job Title: _____ Email: _____

Payment Method

Check Credit Card

Type: Visa Mastercard American Express Discover

Card Number: _____

Expiration Date: _____

Name on Card: _____

Cancellations/ Rescheduling

ALL CANCELLATIONS/RESCHEDULING MUST BE DONE IN WRITING BY FAXING TO 978-246-0248. NO OTHER FORM OF CANCELLATION WILL BE ACCEPTABLE. IF YOU CANCEL AT LEAST 10 BUSINESS DAYS PRIOR TO CLASS, WE WILL APPLY YOUR PAYMENT TO A FUTURE TRAINING CLASS. IN ORDER TO RESERVE YOUR SPOT IN ANY CLASS PREPAYMENT IS REQUIRED BY CHECK OR CREDIT CARD.

Customer Authorization

Print Name

Signature

Date

THANK YOU FOR YOU BUSINESS!