

Watson & Associates LLC
1-866-601-5518 Voice : Fax 720-941-7201

Government Contracts Training Workshops and Class Registration Forms

Name of Company: _____

Address: _____

Type of Company _____

Telephone Number: _____

Point of Contact: _____

Classes Requested

1. _____ Date _____ Price \$ _____

2. _____ Date _____ Price \$ _____

3. _____ Date _____ Price \$ _____

Total Price \$ _____

Names of Attendees (Maximum of 2 Per Company):

_____ Tel # _____

_____ Tel # _____

CREDIT CARD AUTHORIZATION

DATE: _____

NAME ON CARD: _____

ADDRESS OF CARDHOLDER: _____

PHONE NUMBER: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

SERVICES PROVIDED _____

DATE OF CHARGE: _____ AMOUNT TO BE CHARGED: _____

CREDIT CARD NUMBER: _____

(WE DO NOT TAKE AMERICAN EXPRESS)

EXPIRATION DATE: _____ THREE DIGIT CODE ON BACK _____

CARDHOLDER NAME (PRINT): _____

CARDHOLDER SIGNATURE: _____

Charges for Classes will not be processed until the maximum class seats are filled.

Any reservations should be made in allowance for cancellation should the events are not filled.