## 2019 APPLICATOR TRAINING **PROGRAM ENROLLMENT**



COMPANY:	PAR1	FICIPANT:	
TELEPHONE:	PART	TICIPANT TITLE:	You may return the form(s) to Customer Service by:
EMAIL:	FAX:		FAX 253 588 7196
REGISTRATION FEE	S: SPECIAL: Only \$750 (\$490 for each additional	I student from the same company)	
Apr 1-5 Rov	-	14-18 Tacoma, WA 18-22 Rowlett, TX	Lakewood, WA 98499
☐ May 13-17 Tac	oma, WA		Your confirmation will be sent to you within 48 hours of receipt
METHOD OF PAYM	<b>ENT:</b> (Check - Please make cl	heck payable to Specialty Products, Inc.)	of payment.
AMOUNT: \$	TYPE OF CREDI	How did you hear about our training program?	
CREDIT CARD #:	1	EXPIRATION DATE:	
3 DIGIT CODE: NAME AS IS APPEARS ON CARD:			REFERRAL FROM
BILLING ADDRESS:			
CITY:	STATE:	ZIP CODE:	
SIGNATURE:		DATE:	SALES REP.
CONTACT ME FOR C	REDIT CARD INFO		
CANCELLATION PO	OLICY:		
If you cancel 14 business days prior to the class date you will receive a 50% refund and a 50% credit toward the next training class or product order.			ADDITIONAL PARTICIPANTS
	ceived less than 14 business da raining class or product order.	ays prior to class, SPI will credit your full	
SPI reserves the right to car enrollment. In this case you		ne scheduled class date due to lack of	NATURETHANE FOAM . S.
Participant space is not reserved until full payment is received.			THE CLAUTY PRODUCTS TO THE PRO
SPI OFFICE USE (	ONLY:		SPI STORY ROLL OF THE POLYTURE FOAM. SIRRING BOUND SIRRING STORY OF THE POLYTURE FOAM. SIRRING STORY O
ON ACCOUNT:		SALES ORDER #:	
INFORMATION VERIF	TIED BY:		TRAINING ACADEM