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Greensboro, NC 27409  
Phone 336.834.8775  
Toll-Free: 888.WPH.0001  
Fax 336.856.2945  
www.workplacehygiene.com

## Course Registration Form

**Please complete and fax to our secure fax machine**  
Please print legibly in black ink.

**Company:** \_\_\_\_\_

**Name:** \_\_\_\_\_

(use next page for additional attendees)

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Phone:** (    ) \_\_\_\_\_

**Cell Phone:** (    ) \_\_\_\_\_

**Fax:** (    ) \_\_\_\_\_

**Email:** \_\_\_\_\_

Check here if you would like to receive email notices about special course offerings, product developments, or other news.

**Course Title:** \_\_\_\_\_

**Course Date:** \_\_\_\_\_

**Course Location:** \_\_\_\_\_

**Course Fee:** (fees vary and can be found on Web site or by calling) \$ \_\_\_\_\_

(use next page for additional courses for this attendee )

### Payment method:

Check is enclosed (amount- \$ \_\_\_\_\_)

Credit Card (type:  MC  Visa  Amex)

**Card #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**3-digit code** (from back of card): \_\_\_\_\_

**Name on Card:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**A confirmation letter will be sent after your course registration form is received and processed. Directions to the facility and any special instructions will be included.**

**If you do not receive a confirmation letter by a week before the class starts, please call (336) 834-8775.**

Payment is due once you have received your confirmation letter (or have spoken to our registrar to confirm space in the class). Any payments not received one week prior to the course date will result in cancellation of space. If you have any questions, please feel free to call our office at (336) 834-8775.

Thank you for choosing Workplace Hygiene for your training!

**List additional courses or attendees here.**

**Name:** \_\_\_\_\_  
**Course Title:** \_\_\_\_\_  
**Course Date:** \_\_\_\_\_  
**Course Location:** \_\_\_\_\_  
**Course Fee:** (fees vary and can be found on Web site or by calling) \$ \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Course Title:** \_\_\_\_\_  
**Course Date:** \_\_\_\_\_  
**Course Location:** \_\_\_\_\_  
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