



TRAINING Class Registration

Email completed registration form to training@msasafety.com or FAX to 724-741-1562
 Questions? Call 1-866-347-6093

- **Date:** _____ **Desired Training Date(s):** _____
- **Course Number:** _____ **Location:** _____
- **Course Name:** _____

Course Type:	CARE: -FIRE <input type="checkbox"/>	-INDUSTRIAL <input type="checkbox"/>	CONFINED SPACE: <input type="checkbox"/>	FIRST: <input type="checkbox"/>
	COMPETENT USER: -SCBA <input type="checkbox"/>	-PORTABLE INSTRUMENTS <input type="checkbox"/>	-PERMANENT INSTRUMENTS <input type="checkbox"/>	
	MERIT: <input type="checkbox"/>	RITE: <input type="checkbox"/>	SAFETY AT HEIGHTS: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

Class Type:	CERTIFICATION <input type="checkbox"/>	RE-CERTIFICATION <input type="checkbox"/>
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Company Name:		
Billing Address:		
City:	State/Prov:	Zip/Postal Code:
Contact Name:	Phone:	
Email:	Fax:	

List the full names of Individuals attending:

- | | |
|----------|----------|
| 1 _____ | 2 _____ |
| 3 _____ | 4 _____ |
| 5 _____ | 6 _____ |
| 7 _____ | 8 _____ |
| 9 _____ | 10 _____ |
| 11 _____ | 12 _____ |

Purchase Order Number: _____
(or) Payment via credit card: VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/>
Credit Card # _____
Name on Card: _____
Expires: _____ 3 Digit Security Code: _____
(An Invoice will be sent to the Billing Address provided upon completion of course)

[†]MSA reserves the right to change class locations/dates and cancel classes with notice, due to circumstances beyond our control. Customer cancellations with less than 72 hours' notice or Attendee no shows may be subject to a \$250 administrative charge.