



CLASS REGISTRATION FORM

CLASS: _____

DATES: _____

AGENCY NAME: _____

CONTACT NAME: _____ PHONE: _____

LOCATION: _____ AT CMI (\$300/person/day) EMAIL: _____

PARTICIPANT	DEPARTMENT
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____

NOTE: The Participant's Signature will be obtained during the training session.

TERMS:

The cost of this class is \$300 per person per day and the payment is due with registration. Payment must be in the form of a check (CMI is unable to process credit card payments). Due to resource allocation and setup time, this fee is non-refundable. If a participant needs to cancel, another scheduled equivalent class may be substituted within ninety days of cancellation without any additional charge. CMI reserves the right to postpone or cancel a scheduled class in the event it is not technically or economically feasible to render such service. If this is the case, participants will be notified immediately and the paid registration fees will be fully refunded. **Registration must be received 15 working days prior to the scheduled class date.**

A map to our Englewood office and a local hotel list will be provided with the registration confirmation. Please call the Sales Department if you have any questions (800) 686-9313. Customized training is also available at CMI or onsite utilizing your own data. Please contact the Sales Department for pricing and additional information.

Mail this completed registration form with payment to:

CMI University

Creative Microsystems, Inc., 52 Hillside Court, Englewood, OH 45322-2747

Below for CMI internal use only::

Client # _____ Amount Paid \$ _____ Check No. _____ Date of Check _____

Processed by: _____ Date: _____

Attended Did Not Attend Class Rescheduled Refund Issued Date Issued _____

Notes:

