

Attendee Information

Sales Rep. 350

Personal Information		
Full Name:		
Address:		
City	State	ZIP Code
Phone: ()	Fax: ()	
E-mail Address:		
Company		
Seminar Information		
Seminar Name:	Price:	
City		
Seminar Name:	Price:	
City:		
Payment Information		
<i>Payment may be made by Purchase Order <u>or</u> Credit Card</i>		
Purchase order number		
AMEX	VISA	MASTERCARD
Name on card		
Card Number		
Exp. Date		
FAX TO 360-676-0387		Questions? cheri@woolzee.com

For those using Purchase Orders or DD-1556, etc: Please make sure Vendor is identified as: RSMears, 63 Smiths Lane, Kingston MA 02364

Cancellations must be received in writing 10 days prior to seminar or \$150 fee charged. Fee applied to rescheduled seminar