



Course Registration Form

Registrant Information (please print)

Last Name _____ Middle Initial _____ First Name _____

Street _____ City / Town _____

State _____ Zip Code _____ Phone _____

E-mail _____

Employment Information (please print)

Company Name _____

Address _____ City / Town _____

State _____ Zip Code _____ Phone _____

Fax _____ E-mail _____

Course Titles (please check one)

- 8-HR Master & Special Electrician Renewal - \$225.00
- 40-HR Site Safety Manager - \$695.00
- 8-HR Site Safety Manager Refresher - \$225.00
- 8-HR Site Safety Coordinator - \$225.00
- 4-HR Supported Scaffold User & Refresher - \$135.00
- 8-HR Fall Prevention - \$225.00
- 8-HR Prescribed SST Course Bundle - \$225.00
- 8-HR Elective SST Course Bundle - \$225.00

Preferred Course Date (choose from course calendar dates) _____

Distribution Options where applicable (please check one)

- Release card to student after class
- Mail card to company address

Payment Information (please print)

- Check Payment (payable to USIS Electric, Inc.)
Check # _____

- Credit Card Payment Master Card VISA AMEX

Name as it appears on card _____

Card Number _____ Expiration Date _____ CVV _____

Signature _____