

# REGISTRATION

Fax to: 866.339.5624 Mail to: Eclipse Training: 11126 Argentine Road, Linden, MI 48451

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

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

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

NCRA ID #: \_\_\_\_\_

Seminar Location: \_\_\_\_\_

\_\_\_\_\_ 2 days \_\_\_\_\_ Day 1 only \_\_\_\_\_ Day 2 only

\_\_\_\_\_ I am a reporter \_\_\_\_\_ I am a student \_\_\_\_\_ I am a scopist

Enclosed is my check # \_\_\_\_\_ payable to **ReebaCo, Inc.**

Charge my: \_\_\_\_\_ Visa \_\_\_\_\_ Master Card

Name on card: \_\_\_\_\_

Card No: \_\_\_\_\_

Expiration date: \_\_\_\_/\_\_\_\_

Security Code: (last three digits on back of card) \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_

Number of Eclipse training certificates enclosed? \_\_\_\_\_

(Training certificate expired? Call Sandy at 800.800.1759 to request an extension)

All class descriptions are **time permitting** and **may vary** slightly.

**Refund Policy:** *(Cancellations received 14 days prior to event will receive full refund or credit towards future training. Late cancellations will receive full credit towards future training or refund less \$50 to cover processing fees. Venues with less with less than 10 participants may be cancelled and/or participants asked to attend other venue, be given full refund, or option to attend future training. Thanks!!)*