

Sea-Bird Training Enrollment Form

PLEASE:

1. Fill out 1 form for each person from your organization who will be attending the class.
2. Submit the form by **FAX** or **Email** only.

FAX: 425-643-9954
Email: giked@seabird.com

CONTACT INFORMATION

Your name: _____
Institution/Organization/Company: _____
Street address: _____

Telephone: _____ Fax: _____
E-mail: _____

ATTENDANCE INFORMATION

I will attend the training session the week of (see website for dates): _____
I need Sea-Bird to supply a rented laptop computer: Yes (\$250) No

Total Cost = \$800 + (\$250 optional laptop rental)
= \$ _____

PAYMENT/BILLING INFORMATION (credit card, purchase order, or check)

Credit Card:
 Visa Master Card American Express
Account Number: _____ Expiration Date: _____
(Please call us directly with your credit card security code number. Do not include it here!)
Card Holder Name (printed or typed): _____
Card Holder Signature: _____

Invoice/Purchase Order (enclose a copy of your Purchase Order):
Purchase Order Number: _____
Billing Address (if different than shipping address):

Check (enclosed)

QUESTIONS OR OTHER INFORMATION?

