

## Request for Training At Siskiyou Products

### Part 1: Customer Information

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Home: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

### Part 2: Training Information

Program of interest:  Cabinet Pro  Door Pro  Furniture Pro  Garage Pro

**Date of Training:**

1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_ 3<sup>rd</sup> Choice: \_\_\_\_\_

Actual Day:  Mon  Tue  Wed  Thu  Fri  Sat  Sun

**Beginning Time of Training:**

1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_ 3<sup>rd</sup> Choice: \_\_\_\_\_

Training will end at 5PM, P.S.T.

### Part 3: Charges

Group 1 Rate: **\$125 per hour for Sat, Sun, Mon, Tue**

Group 2 Rate: **\$75 per hour for Wed, Thu, Fri**

**Calculation of Cost:**

\$125 x \_\_\_\_\_ hours = \_\_\_\_\_ (Multiply \$125 by the number hours reserved if the day of training falls on a Group 1 day.)

\$75 x \_\_\_\_\_ hours = \_\_\_\_\_ (Multiply \$75 by the number hours reserved if the day of training falls on a Group 2 day.)

Sub Total = \_\_\_\_\_ (Add the two lines above.)

Additional= \_\_\_\_\_ (Add 50% of the Sub Total above for each person over two.)

Total = \_\_\_\_\_ (This is the amount you are authorizing to be deducted from your credit card below.)

### Part 4: Credit Card Information

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_ 3-Digit Security Code (CCV): \_\_\_\_\_

Address on record with  
Credit Card Company: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby authorize the total shown in Part 3 above to be deducted from this credit card.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The above signature authorizes payment and signifies agreement with the contents of this request for training.

This contract is not binding until you receive an approval via email.