

Registration Form SCC-ASHI Seminar

Name _____

E-mail Address _____

Phone # _____

ASHI Membership # _____

Primary time requested _____ AM / PM Friday / Saturday

Secondary time _____ AM / PM Friday / Saturday

All scheduling on a first come – first served basis.

Please bring a check made out to SCC-ASHI at the time of the inspection. \$40.00 if the application is made before August 7 - \$50.00 if applied on August 7 or later.

You will be required to sign of release of liability during the seminar.

Please fax or e-mail the Registration form to:

mikehome07@msn.com

Fax # 719 686-1677