

ABAY SERVICES, LLC

ONLINE TRAINING - ENROLLMENT REQUEST

440 Main Street, Unit 100 | Stevensville, MD 21666 | 667-337-0346
lab@abayservices.org | www.abayservices.org

Complete one form per participant. Enrollment is subject to course availability and confirmation.

1 PARTICIPANT INFORMATION

Full legal name

Email address

Phone number

Job title / position

2 EMPLOYER / BILLING INFORMATION

Company / organization (if applicable)

Authorized company contact

Company email

Billing contact email

Company phone

Billing address

3 SELECT TRAINING COURSE

Enter the course name or code from the current Abay Services training catalog.

Course title

Advertised course price (\$)

TRAINING SCHEDULE

Abay confirms the schedule after any applicable minimum enrollment is met.

Training catalog examples (availability and listed prices must be confirmed at registration):

- DOT Supervisor Training | Non-DOT Supervisor Training | Drug-Free Workplace Training
- DOT Urine Specimen Collector Training & Mocks | DOT Oral Fluid Collector Train-the-Trainer
- Hair Specimen Collector Training | FMCSA / FRA / PHMSA DER Training
- Non-DOT General DER Training | Probation & Court-Ordered Drug Test Training

4 ENROLLMENT TYPE

☐ Individual / self-funded

☐ Employer-sponsored / company-paid

☐ Group enrollment inquiry

Number of participants in group (if applicable)

Additional participant / group reference

IMPORTANT: Minimum enrollment of 3 applies only to courses designated as group/minimum-enrollment courses. Access links are sent after the applicable enrollment requirement has been met.

Do not submit medical information, Social Security numbers, or payment card details on this form.

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ONLINE TRAINING - AUTHORIZATION & PROCESSING

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5 TRAINING ACCESS AND SPECIAL REQUESTS

Preferred delivery / contact email (if different from participant email)

Accommodation or administrative request (do not include medical details):

6 PAYMENT AND ENROLLMENT ACKNOWLEDGMENT

Submitting this form is an enrollment request, not a confirmed course registration.

Abay Services will verify current course availability, pricing, delivery format and prerequisites.

Payment will be collected only through an approved, secure checkout or agreed employer billing process.

Course access information will be sent after registration, payment where required, and any applicable minimum enrollment or provider requirements are satisfied. Course certificates depend on completion of the applicable provider requirements.

☐ I understand and agree to the enrollment and payment terms above.

☐ If company-sponsored, I am authorized to request training for this participant.

7 REQUESTER AUTHORIZATION

Requester full name

Requester title / relationship

Typed signature (electronic acknowledgment)

Date

Typing your name and submitting this form indicates authorization to be contacted about enrollment.

FOR ABAY SERVICES USE ONLY

Enrollment reference

Confirmed course / price

Enrollment status

Processed by / date

RETURN: Submit through the designated secure Abay Services enrollment workflow.

For questions: lab@abayservices.org | 667-337-0346