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|  **www.safetyandcpr.com** | USC – University Safety and CPR(877) USC-1911 ph. / email: safetyandcpr@att.net |

# Student Course Enrollment Form – Please complete form (online fillable)

## Student Information

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  |  |  |
|  | First:  | M.I.: | Last:  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State  | ZIP Code  |

|  |  |  |  |
| --- | --- | --- | --- |
| Work Phone: |  | Mobile Phone: |  |

|  |  |
| --- | --- |
| Email |  |
| Last 4 SSN or Gov’t ID: |  |

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| --- | --- | --- | --- |
| Course LLocation | 3320 W. Manchester Blvd. | City, State, Zip | Inglewood, Ca 90305 |

|  |  |
| --- | --- |
| Check the Course Title | CPR/FA OSHA 10/30 EM385 OSHA Compliance Course x |

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| --- | --- | --- | --- |
| Start Date | April 3-6, 2018x | Course total **$575.00**Discounted Price | Total $675.00 (-$100.00) EM385 & OSHA 30 Both Certifications |

## Student Job Information

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## PAYMENT INFORMATION

Billing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  Account Type: [ ]  Visa [ ]  MasterCard [ ]  AMEX [ ]  Discover [ ]  ATM Cardholder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_ 3 Digit CVC Security Code \_\_\_\_\_\_\_\_\_\_\_\_ Billing Zip Code \_\_\_\_\_\_\_\_\_\_\_\_Cash [ ]  Company Check [ ]  Paypal Money Request [ ]  \*Note: No personal checks accepted |

SIGNATURE DATE

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.