

FLEX-C-MENT™ TRAINING REGISTRATION FORM

Complete this form and send check or money order to: FLEX-C-MENT PRODUCTS 1205 PALESTINE ROAD
PICAYUNE, MS 39466 or you may Fax this form with your credit card information to: (601)798-1069.

Name _____ Title _____

Company _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax # _____

Email _____ Website _____

Desired Training Dates _____

(for available dates see website: www.flex-c-ment.com or call: 888-515-2132)

Number of attendees _____ Cost- \$650.00 for first person, \$150.00 for each additional person from same company. Total Cost _____.

Please list the first and last names of all the attendees. 1) _____

2) _____ 3) _____

4) _____ 5) _____

Please answer the following questions:

Your current Business Type: _____

You are interested in: Becoming a Flex-c-ment Dealer/Installer Becoming a Flex-c-ment Distributer

CREDIT CARD INFORMATION

TYPE OF CREDIT CARD: (check one) Master Card Visa

CREDIT CARD NUMBER: _____

CARDHOLDER'S NAME: (as appears on card) _____

COMPANY NAME: _____

EXPIRATION DATE OF CREDIT CARD: _____ / _____ Three Digit No. on Signature Line _____
Month Year

Description of Charges: FLEX-C-MENT PRODUCTS div. of CAG, Inc. **TOTAL \$**

I hereby authorize Flex-C-Ment Products div. of CAG, Inc. to apply the total amount shown above to the referenced credit card account

Please **print** your name

Please **sign** your name

By my signature, I authorize the user of the card identified on this item to pay the amount shown as total upon proper presentation. I agree to pay such total (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card. I agree to hold harmless Flex-C-Ment Products and all related companies from any and all liability arising out of this authorization, including consequential damages.

Please note all classes are filled on a "first come first serve" basis. ****Note: Any cancellations within one week before your training date will be subject to a \$100.00 refund fee. This includes no shows.**



Flex-C-Ment Products (a division of Custom Aggregates & Grinding) P.O. Box 758 Picayune, MS 39466
Ph: (888)515-2132- Fax: (601)798-1069.