



Rhode Island American Society for Quality REGISTRATION FORM – EDUCATION

INSTRUCTIONS:

rev 07/07/2010

1. Fill in the course registration form COMPLETELY below. NO WALK-INS PLEASE!
2. Please CLEARLY print your name as you would like it to appear on course certificate.
3. Payment methods: check, money order, purchase order, or credit card.
4. Send completed form and payment (made payable to: RIASQ) to:

P.O. Box 225 Seekonk, MA 02771 *or* email to esilva@smartmgmt.com **AND** dchapman@electrochemsolutions.com

Registration must be received **TWO WEEKS** prior to class start date or late fees may be imposed.

Name: _____ Title: _____

Street: _____ Circle: Home or Business

City _____ State _____ Zip: _____ Company: _____

Home Phone: () _____ Business Phone: () _____ Fax #: () _____

ASQ Member: Yes No Membership #: _____ E-mail: _____

Course/Seminar Name: _____

Method of Payment: **payable to RIASQ:** Check or Money Order P.O. (enclose copy) #: _____

VISA MASTER CARD Credit Card #: _____ Expiration Date _____

C Card Billing Address: Nbr/Str: _____ City: _____ State: _____ Zip: _____

Signature: _____

Please describe how you learned about this training course / seminar _____

Course Cancellations: Last minute business commitments may affect a student's ability to attend a training event. However, because of facility, instructor, and course material commitments, the following cancellation fees are acknowledged by submitting this registration:

Certification Refresher / Development Courses: 15% cancellation fee for cancellations within seven (7) days of the start date.

Seminar Cancellations: No refunds for cancellations that occur within seven (7) days of the start date.

No additional fee for an alternate attendee provided they meet any applicable pre-requisites.

NEED IN-HOUSE TRAINING? QUESTIONS? Contact Ed Silva (401)780-2300 X109 or Dean Chapman (781)830-5873