

For Office Use:
 ORS _____
 LMS _____



MicroAssist

COURSE REGISTRATION FORM

Training Division

8500 Shoal Creek, Building 4, Suite 225
 Austin, Texas 78727

Instructions:

1. Please fax completed registration form to MicroAssist at (512)794-8742.
 2. Student is responsible for meeting all course prerequisites.
- For information or assistance, please call (512)794-8440.*

Course Title	Date	Time	Course Fee (per person)	
Participant Name	Job Title	Phone Number	Fax Number	E-Mail Address
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

All cancellations must be received 2 working days prior to class start date. Late cancellations will be subject to a full fee charge. Qualified substitutions are permissible with prior notice to MicroAssist. Classes are subject to rescheduling or cancellation due to low enrollment.

Contact Person	Phone Number	Fax Number	Email Address
Mailing Address	City	State	Zip
PO Number	Signature of Person Authorized to Commit Funds		