

2011 CEC Training Enrollment Form

Name _____ Title _____

Company Name _____

Street Address _____

City/State _____ Zip Code _____

Phone (____) _____ Fax (____) _____

Email address _____

Signature (*required*) _____

Fee: \$150.00 per person.

Payment Information

Check Enclosed Check amt _____ Check # _____

Purchase Order P.O. amt _____ P.O. # _____

Charge to: M/C VISA AMERICAN EXPRESS DISCOVER

Card number:

Exp. Date:

CARD HOLDER NAME: _____

Registration Information: Due by 6/1/11

Call Mary Klockner at Control Engineering 630-954-1300

Fax to 630-954-1380 attn: Mary Klockner

E-mail to mklockner@controlengineering.net

Mail completed form to: Control Engineering Corp.
2000 York Road, Suite 102
Oak Brook, IL 60523
Attn: Mary Klockner

Cancellations and Substitutions

Cancellations received up to 5 business days before the training are refundable, less a service fee, which may be applied toward any future training. Cancellations received less than 5 business days before the training are subject to the entire fee, which may also be applied to a future training. Please note that if you do not cancel and do not attend, you are still responsible for payment. Substitutions can be made at any time.