

Online Training Registration Form

Fax To: 720 920 8228

Please complete the following and fax to the number above or email to B360Support@constellationhb.com at least **2 days in advance** of the scheduled start time.

| | | | | | |
|-----------------------------|--|---------------|--|-------------|--|
| Company: | | | | | |
| Contact Name: | | Email: | | | |
| Additional Attendee: | | Email: | | | |
| Additional Attendee: | | Email: | | | |
| Address: | | | | | |
| City: | | State: | | Zip: | |
| Phone: | | Fax: | | | |

| Course # | Description | Date | Time | Cost |
|----------|-------------|------|------|------|
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CANCELLATION POLICY – A full refund will be provided if canceling 24 hours prior to scheduled class time. No-shows and cancellations after this 24-hour period will result in the loss of the class fee.

PAYMENT

The fee for one training session is **\$150.00** per connection to the class. If more than one person will connect via the Internet to the class, please include the person's name on this registration and add the appropriate fee.

COMPANY NAME _____ CARD HOLDER NAME _____

Visa MasterCard AMEX CARD EXPIRATION DATE ____/____/____

CREDIT CARD NUMBER

| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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I hereby authorize Constellation HomeBuilder Systems, Inc. to charge the amount listed below to my credit card.

ONE TIME CHARGE OF US \$ _____

AUTHORIZED BY _____ TODAY'S DATE ____/____/____
(SIGNATURE)

**FAX TO:
720-920-8228**

Once registration is complete, an email will be sent confirming your registration and will include the Webex Meeting details including the Webex link, password and phone number.