

1410 Spring Hill Road
Suite 250
McLean, VA 22102
(703) 245-9770



211 N. Loop 1604 E.
Suite 200
San Antonio, TX 78232
(210) 403-5600

Please complete the following form and return to SecureInfo Corporation Training Department at training@secureinfo.com.

SecureInfo Corporation Training Registration Form

Student Name: _____ Course: _____

Date of Course: _____ Location of Course: _____

Company/Organization: _____

Address: _____ Suite/Room/Bldg. _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail Address: _____

How did you hear about SecureInfo Training? (Please select from the following list):

Internet Search _____ SecureInfo Website _____ E-mail from SecureInfo _____ Conference _____

Previously Taken a Course with SecureInfo _____ Coworker _____ Partner with SecureInfo _____

Company Training Department _____ Other (Please specify): _____

Signature Required Below For All Courses – Please read and sign to finalize registration requirements.

SecureInfo Cancellation Policy: SecureInfo reserves the right to cancel any class within 14 calendar days of the start date, if minimum registration requirements have not been met, as determined by SecureInfo Corporation. In such cases, SecureInfo Corporation will notify registered students via the contact information provided to SecureInfo at the time of registration. SecureInfo will attempt to reschedule all students who have received a cancellation notice for registered classes. Students may also opt to receive a full refund for classes cancelled by SecureInfo.

Students who wish to cancel their registration for a scheduled class must provide written notice to SecureInfo to include student name, course title, course date, and course location. To obtain a refund for the scheduled class, cancellation notices must be received no less than 14 calendar days prior to the class start date. If registration cancellation notice has not been received 14 calendar days prior to course start date, the student may substitute another student in the class or reschedule the registration for a later class. No refunds will be given for cancellation notices received less than 14 calendar days before the class start date. Contact the SecureInfo training department at training@secureinfo.com for more details or questions regarding the SecureInfo Cancellation Policy.

Student Signature

Date

Website: www.secureinfo.com
E-mail: training@secureinfo.com
Fax: (210) 403-5702

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By signing above, I acknowledge that I have read and agree to the SecureInfo Cancellation Policy.

Payment Information:	Number of Students	Registration Fee
_____Registration for Military or Government Civilian.....	_____\$ _____
_____Registration for Contractor or Corporate Rate.....	_____\$ _____
Total Due.....	_____\$ _____

Payment Method:

_____Check _____MasterCard _____Visa _____American Express _____Purchase Order

Name of Finance Officer/Payment Official: _____

Cardholder Name: _____ Phone Number: _____

E-mail Address: _____

Credit Card Account Number: _____ Expiration Date: _____

Billing Address: _____

Special Instructions/Notes: _____

*****Internal SecureInfo Use Only*****

Credit Transaction Processed By: _____ Date of Transaction: _____

Amount Charged: _____ Check Transaction Issued By: _____

Check Number: _____ Confirmation Sent to: _____