

Custom Training Request Form

Please use this form to request a private training session. Based on your training needs, we will contact you with a quote. Incomplete forms will delay processing. **Please print clearly!** Thank you!

n individual or busin l. Please complete sec . Please complete sect	tion 1a & skip 1b		
1a for individuals First name			
State	Zip		
Phone			
1b for businesses			
Website (if app	Website (if applicable)		
Student name	(leave blank if it's you)		
State	Zip		
Phone			
	Phone Website (if app Student name		

Desired training		
Tell us about your specific learning need(s)	Preferred days & times (please specify at least three alternatives)	
Signature Date		

I certify that I have read, understood, and will abide by the guidelines stated below:

- You are at least 18 years of age. For safety, children (including infants) are not permitted while class is in session.
- Techna Center, LLC reserves the right to reschedule, postpone, extend or cancel any course
 due to circumstances beyond Techna Center, LLC's control. If a course is cancelled by Techna
 Center, LLC for any reason, you can enroll in a subsequent course or upon your request a full
 refund will be issued of the fees paid for that course.
- Cancellation requests and no-shows are not subject to any refunds.
- A \$35 fee will be charged for any bank-rejected checks.