



Training Registration Form

Submit the completed Registration Form to ACM Automation Inc. via email at info@acm.ab.ca or fax to 1 (403) 264-6671. If you are completing the registration on behalf of your staff, please provide an Administrative Contact. Payment can be made by VISA, MasterCard, cheque, or money order. Please note there will be an additional surcharge on Amex for 3.25%

Please make cheque payable to:

ACM Automation Inc.
Suite 825, 906 – 12th Avenue SW
Calgary, Alberta T2R 1K7

Registrant Information:

Name: _____

Company: _____

Position: _____

Phone #: _____ Fax #: _____

Billing Address: _____

City: _____ Province/State: _____

Postal Code/ZIP: _____ Country: _____

Email: _____

ACM Course Name: _____

Course # : _____ **Course Date:** _____

Method of Payment: VISA () MasterCard () Amex () Cheque () Money Order ()

Name on Credit Card: _____

Credit Card #: _____ Expiry Date: _____

Signature: _____

Administrative Contact:

Name: _____

Position: _____

Phone #: _____ Fax #: _____

Billing Address: _____

City: _____ Province/State: _____

Postal Code/ZIP: _____ Country: _____

Email: _____

Response with confirmation will be sent over within 24 hours of the next business day.
Thank you for your registration!