

Class Registration

Name: _____

Address: _____

City _____ State _____ Zip _____

Home Telephone (____) _____ Cell Phone (____) _____

Restaurant Name _____

Manager _____ Telephone (____) _____

Class Information

Class Date _____ Class Location _____

- | | | |
|--------------------------|--|----------|
| <input type="checkbox"/> | TIPS On Premise Alcohol Awareness Course | \$45.00 |
| <input type="checkbox"/> | ServSafe Food Handler's Full Day Course | \$135.00 |
| <input type="checkbox"/> | ServSafe Review, Exam and Book | \$85.00 |
| <input type="checkbox"/> | ServSafe Review and Exam Only | \$55.00 |

Payment: Cash Check Credit

Circle One: Visa MC Amex

Card Number _____ Expiration Date _____

Hosting A Class

Restaurant Name _____

Address _____

Phone _____ Contact Person _____

Type of Class _____

Date & Times _____

Number of In-House Participants _____ Number of Outside Participants _____

Mail to Restaurant Management Solutions, Inc. 5416 Bromyard Ct, Burke, VA 22015
or fax to 1-866-301-5513