



# REGISTRATION FORM

**Registration Options** – Please *check* the fee(s) for your registration and insert the amount due on this page.

**NGV Driver and Mechanic Safety Training**

May 25, 2010 — Riverside, CA

\$395 if registering through April 30

\$495 if registering after April 30

**CNG Fuel System Inspector Training Course**

May 26-27, 2010 — Riverside, CA

\$695 if registering through April 30

\$795 if registering after April 30

**Attendee Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St/Prov \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone (optional) \_\_\_\_\_

A unique email address is required for each attendee. Please indicate your unique email address here:

\_\_\_\_\_

If you would like an additional person to receive this attendee's confirmation e-mail, please include that e-mail address here \_\_\_\_\_

**Payment Method and Cancellation Policy**

You may pay by check, government purchase order, or credit card (Visa, MasterCard and American Express only). **Payment in full is required before registration is considered complete.**

We are reserving a confirmed space for you at this training. We do not accept cancellations and refunds will not be made for failure to attend. Registration fees cannot be transferred to other scheduled classes. If you are not able to attend, substitutions within the same company are welcome. Substitutions must be made in writing and sent by email to [ngvittraining@ngvi.com](mailto:ngvittraining@ngvi.com) or mailed to Natural Gas Vehicle Institute.

**Total Payment Due** \$ \_\_\_\_\_ (U.S. \$) (Mark appropriate fee(s) on the this page and repeat total here.)

Check/Government Purchase Order payable to Natural Gas Vehicle Institute

Visa, MasterCard or American Express (Diner's Club or Discover Card are not accepted.)

Visa or Master Card #     -     -     -     Exp. Date   /

AMEX Card #     -       -      Exp. Date   /

Address where credit card bill is received \_\_\_\_\_  
Street address

\_\_\_\_\_ City/St/Zip

Name on card \_\_\_\_\_

Signature \_\_\_\_\_

*By signing this form I authorize payment to NGVi. I also acknowledge that I have read and agree to the cancellation policy noted above.*

Submit the completed form with payment to: NGVi, 6771 W Charleston Blvd, Ste C, Las Vegas, NV 89146

Fax 702-254-4630. Upon receipt, a confirmation will be emailed.

Questions? Please contact us at 702- 254-4180 or via email at [info@ngvi.com](mailto:info@ngvi.com).