

To Register:

By phone: (202) 314-3320 or (888) 744-GRAD

By fax: (202) 479-6843 or (866) FAX-GRAD

By mail or walk-in:

Customer Service Center, Capital Gallery Building
600 Maryland Avenue, SW,
Washington, DC 20024

Online: www.grad.usda.gov

Training Authorization

Fax registration form and signed training form, billing authorization or purchase order. Follow up with original and one copy of these forms.

Registration Confirmation

Receipt of your registration will be acknowledged within five business days.

COURSE REGISTRATION FORM

Last Name	First Name	Middle Initial	Social Security Number	Title
Other Name Previously Enrolled under (e.g. maiden name)			Date of Birth (month/day/year)	
Preferred Address	City	State	Zip Code	
Daytime Phone	Home Phone	Fax Number		
()		()		()
E-mail Address		Employer/Job Title		

CLASS ENROLLMENT

Course #	Course Title	Start Date	Location	Check One	Tuition	Amount Due
				<input type="checkbox"/> CREDIT <input type="checkbox"/> AUDIT		
Course #	Course Title	Start Date	Location	Check One	Tuition	Amount Due
				<input type="checkbox"/> CREDIT <input type="checkbox"/> AUDIT		

METHOD OF PAYMENT

Please check one: Check Money Order Visa MasterCard American Express Diners Club

For credit card payment:

Card Number	Expiration Date
Cardholder's Name	Cardholder's Signature

For check payment:

Driver's License Number

How did you first hear about this course?

- | | | | | |
|--|---|---|---|---|
| <input type="checkbox"/> Printed catalog | <input type="checkbox"/> Friend/Colleague | <input type="checkbox"/> Training Officer | <input type="checkbox"/> Conference | <input type="checkbox"/> Another Web site |
| <input type="checkbox"/> E-mail | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Brochure | <input type="checkbox"/> Graduate School Web site | <input type="checkbox"/> Other _____ |