



Wall Colmonoy Brazing School

Registration Form

To enroll, simply complete the bottom portion of this form, and send along with check or payment information to:

Wall Colmonoy Corporation
Attn: Lydia Lee
101 W. Girard, Madison Heights, MI 48071
Tel: 248-585-6400 ext. 252 Fax: 248-585-7960
lydialee@wallcolmonoy.com

Please register me (and others from my plant location) as shown below. A check for \$1550. (payable to Wall Colmonoy Corp.) is enclosed. (An Additional \$1450. is enclosed for each additional attendee.) Payment may also be made by VISA, Master Card, or American Express.

Any cancellations received less than two weeks prior to the course will be subject to a \$100.00 cancellation fee.

Dates: (Circle one)

December 8-10, 2009 • May 11-13, 2010

Register

Name _____

Title _____

Company _____

Address _____

Phone No. _____

E-Mail _____

Attach list of additional attendees.