

PITI - Home Inspection Registration Form

Email: pitikc@hotmail.com

Efax: (267) 222-7185

Phone: (800) 533-7973

Cell: (918) 816-0607 (speak to an instructor)

If Mailing Registration Form & Check:

**PITI - 923 NE Woods Chapel Rd / Ste #406
Lees Summit, MO 64064**

Print This Form Fill It Out, Then Mail, Fax or Email To Us Using Above Information

Seminar Location: Independence, MO (Noland Rd / I-70 Area - unless otherwise noted)

Seminar Dates: From _____ To _____ (dd/mm/yyyy)

Seminar Type: 12 Day Night Class Custom Plan

Your Name: _____

Company Name: _____

Street Address: _____

City: _____

State: _____ Zip Code: _____

Home Phone: _____ Fax: _____

Cell Phn: _____ Email: _____

Payment Method: Visa MasterCard Discover Check / Money Order

- (a) Partial Deposit Payment Enclosed / Credit Card Info or Check **\$500 each** (Balance Due at Door)
(b) Full Payment (Early Payment Discount To Be Applied / For fees Paid 10 work days or more prior to class)
(c) Night Class Installment Plan (\$500 Deposit + \$450 at Door 1st Night then \$750 p/mnth for duration of class)
(Any Checks or Money Orders made out to PITI (Professional Inspection Training & Instruction))

Enclose One Registration Form Per Attendee

If Paying by Mastercard, Visa or Discover, we need the following information:

Type of Card: Mastercard Visa Discover Exp. Date: _____

Account Number: _____

3 or 4 digit security code: _____ Billing Zipcode of Card: _____

Print Name Exactly as on Card: _____

Signature of Cardholder: _____

**** No Walk-Ins Allowed) DAY Classes run from 9:00am to 6:00pm daily
NIGHT Classes run from about 5:30pm to 9:30pm Tues & Thurs**

(Payment In Full 2 Weeks Or More In Advance Of Class Is Required For Any Discounts)