

DEGESCH AMERICA, INC. RECERTIFICATION PROGRAM REGISTRATION FORM

APRIL 25, 2023

REGISTER BY 4/1/2023 TO PREVENT A LATE CHARGE

NAME:

LAST NAME

FIRST NAME

MIDDLE

HOME ADDRESS:

ADDRESS

CITY

STATE

ZIP CODE

COMPANY: _____

BUSINESS TELEPHONE: _____

E-MAIL: _____

REGISTRATION FEE - \$225.00 (INCLUDES LUNCH) VISA AND MASTERCARD ARE ACCEPTED

Degesch America, Inc. will be offering a Pre-Program Dinner for attendees for an additional \$45. The group dinner will be on April 24th at the Hotel Cocktails start at 5:00pm and dinner starts at 6:00pm.

[] Yes, include the Pre-Program Dinner for \$45 Total Amount charged to this card: _____

MC _____ VISA _____ (PLEASE CHECK ONE)

ACCOUNT NO: _____ EXP DATE: _____ SECURITY CODE: _____
(3 DIGITS ON BACK)

NAME ON CARD: _____

BILLING ADDRESS: _____

SIGNATURE: _____

PROVIDE YOUR CERTIFICATION NUMBER NEXT TO THE STATE(S) FOR WHICH YOU REQUIRE CREDIT:

STATE _____ LICENSE No. _____ STATE: _____ LICENSE No. _____
STATE _____ LICENSE No. _____ STATE: _____ LICENSE No. _____
STATE _____ LICENSE No. _____ STATE: _____ LICENSE No. _____
STATE _____ LICENSE No. _____ STATE: _____ LICENSE No. _____
STATE _____ LICENSE No. _____ STATE: _____ TX. AG. LICENSE No. _____
STATE _____ LICENSE NO. _____ STATE: _____ TX. ST. LICENSE NO. _____

NC APPLICATORS: PLEASE GIVE: LTYPE _____ & FNUM _____

NC DEALERS LICENSE: LTYPE _____ & FNUM _____

DUE TO NEW FEDERAL REGULATIONS, YOU WILL BE REQUIRED TO PROVIDE A PICTURE ID AND ALL APPLICATOR LICENSES FOR WHICH YOU WISH TO RECEIVE CREDIT