

# Monaco Enterprises Seminar Registration Form

Name on Certificate: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name for Badge: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Job Title: \_\_\_\_\_  
 Organization: \_\_\_\_\_ Base: \_\_\_\_\_  
 Phone (work): \_\_\_\_\_ (home): \_\_\_\_\_ Fax (work): \_\_\_\_\_  
 E-mail (work): \_\_\_\_\_

## Job Duties and Background (Relative to Alarm Systems)

**Please Check the Training Classes and Dates (Spring, Summer and/or Fall) You Plan to Attend**  
*All training classes listed below are \$1,400.00 per student*

Course No.	Training Class Description	Spring 2012 Dates	Summer 2012 Dates	Fall 2012 Dates
020-000-00	Fire Alarm Systems Design and Maintenance ( <b>Note:</b> Only offered in Spring, please see pre-requisites below to ensure proper scheduling of classes)	<input type="checkbox"/> March 12-16		
020-017-00	D-21 Central Receiving	<input type="checkbox"/> March 5-9	<input type="checkbox"/> June 4-8	<input type="checkbox"/> October 8-12
020-020-00	BT-X FSK Fire & MNS**	<input type="checkbox"/> March 26-30	<input type="checkbox"/> June 18-22	<input type="checkbox"/> October 15-19
020-021-00	M-2/MAAP/MAAP+ Addressable Installation, Operation and Maintenance**	<input type="checkbox"/> March 19-23	<input type="checkbox"/> June 11-15	<input type="checkbox"/> October 22-26

**Important Notes:**

- **\*\*Prerequisite:** Requires completion of (020-000-00) Fire Alarm Systems Design and Maintenance within the last two years, or NICET Level II, or five years of experience in fire alarm panel installation
- Courses 020-008-00, 020-019-00, 020-020-00 and 020-021-00 require the student to provide their own laptop with administrator access to install software required in the class. In addition, a 1Gb Thumb drive is required for 020-021-00.
- All digital photography taken during the training class as well as completed handouts and materials are the sole property of Monaco Enterprises and may be used for future marketing and advertising purposes.

**Method of Payment:**

Check or Money Order Enclosed  
 VISA  Master Card  \*American Express Number: \_\_\_\_\_  
 Credit Card Security Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Card Holder Name Imprinted on Credit Card: \_\_\_\_\_  
 Card Holder Address: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

***I confirm that I have read and accept all registration, cancellation, and attendance requirements and conditions.***

**X** \_\_\_\_\_  
**Authorizing Signature**

**X** \_\_\_\_\_  
**Attendee Signature**

\*American Express requires additional paper work to complete the transaction, contact the Customer Service Assistant at Monaco Enterprises. 09/22/2011 Rev G