



Horizon CPO Seminars Registration Form



REGISTRATION INSTRUCTIONS

All asterisk (*) fields are required. **Incomplete forms will not be accepted.**

Please complete one registration per registrant.

For faster processing, please email your form to seminars@horizonpoolsupply.com. Although mailing your form is acceptable, we cannot ensure availability upon receiving it. Registrations are processed in the order in which they are received. To enroll in the **recertification course**, we **require** a copy of a current and valid certificate.

*PARTICIPANT'S INFORMATION

*Name: _____

*Company: _____

*Phone: _____ Opt In for Text Msg:

*Email: **NO SHARED COMPANY EMAIL ALLOWED**

*Mailing Address: **CERTIFICATE DELIVERY ADDRESS**

STREET ADDRESS

APT/SUITE/UNIT

CITY, STATE, ZIP CODE

*METHOD OF PAYMENT

Please ensure that you settle your invoice promptly. We suggest making payment with a credit card to expedite processing. Certificates will be issued once full payment has been received.

Pay by Check: MAKE PAYABLE TO "HORIZON SEMINARS"

Provide Invoice: PAYMENT IS DUE UPON RECEIPT

Pay by Credit Card: **SD TRANSACTION FEE WILL BE APPLIED PER REGISTRATION**

Amex **Discover** **Mastercard** **Visa**

CARD NUMBER

EXPIRATION DATE

CARDHOLDER NAME

TERMS & CONDITIONS

You, the participant, is solely responsible to furnish accurate information to receive appropriate communication regarding class information, updates, and/or cancellation. We, Horizon Commercial Pools, are not liable for any errors or omissions in the information submitted. You are fully responsible for any expenses incurred for class time or material taken. Additionally, when making hotel reservations, it is important that you communicate directly with the hotel to obtain relevant information about their policies. We are not liable for any fees associated with cancellations, rescheduling, third-party reservation fees, or any other charges you may incur. Lastly, ensure that you are enrolling in the appropriate seminar type, as we also provide AFO (Aquatic Facility Operator) classes. If you require assistance in determining which seminar to take, please contact us for verification.

CANCELLATION: To receive a full refund, we must receive written notice via email before the registration deadline, without any prior rescheduling. Please include the participant's name and class dates in the request. The refund will be issued in the original form of payment used to pay the registration fee.

RESCHEDULE: To reschedule, we must receive written notice via email. Participants are allowed a one-time reschedule to any future class date with their original instructor within a 30-day window from the date we receive the written request. Failure to reschedule within this time frame, the registration fee will be forfeited. In the event of a rescheduling and the participant fails to attend, the registration fee will be forfeited. At this time, participants are required to re-register and submit payment once more.

I, _____, **acknowledge that by selecting this checkbox, I have read and accept the terms and conditions stated on this form.** Date: _____

COMPANY INFORMATION

*SAME AS PARTICIPANT

All email addresses will receive confirmation containing class details, and if payment has been made a receipt will be included.

Enroller: _____

Position: _____

Phone: _____ PO #: _____

Email: _____

*CLASS INFORMATION

*Class Type:

Retest

2-Day CPO

Recertification

*LOCATION	*DATE(S)	CLASS CODE	FEE

***The fee will be automatically adjusted to the corresponding class you have registered for, including any applicable credit card fees.*

Notes: