



Horizon CPO Certification Seminar Registration Form

Please fill out one registration form per participant. To expedite your reservation, e-mail in your form. Although mailing is an option, we **highly recommend** e-mailing us a copy of the form to reserve your spot while you mail the payment as classes can fill up during at the time of delivery. If you mail in the form, we cannot guarantee that we will have availability at the time of receiving the form. For recertification registrations, we **require** a copy of your valid certificate to be eligible to sign up.

All fields are required to be filled in correctly. Incomplete forms will NOT be processed.

Date: _____

Participant Information:

Name: _____

Phone Number: _____

E-mail: _____

Physical CPO Certificate from PHTA will be sent to the address provided.

Mailing Address: _____

City, State, Zip Code: _____

Accounts Payable Contact Information:

Company or Property Name: _____

Contact Person: _____

Phone Number: _____

E-mail: _____

Purchase Order # (if applicable): _____

Location	Dates	Class Code	Cost*

Once your registration has been processed, all e-mails on the form will receive an e-mail confirmation with class details and a receipt, if payment was provided. If you do not provide a credit card, an invoice will be e-mailed requesting for payment. If payment is not received before class starts, your certificate may be held until payment has been collected in full.

Payment Information:

Make check payable/mail to:

Horizon Seminars
4444 Round Lake Rd W
Arden Hills, MN 55112

Credit Card Payment Information:

Credit Card: Visa Mastercard
 AMEX Discover

Email forms to:

seminars@horizonpoolsupply.com

*All credit card payments for CPO classes will incur an additional \$10 fee for each registration.

For questions, please email or call us at **651-917-3075, option 5**

Card Number: _____ - _____ - _____ - _____

Exp. Date: _____

You can find our cancellation/rescheduling policy on our website.

Card Holder Name: _____