ALBERTA MOTOR VEHICLE INDUSTRY COUNCIL

# *Salesperson Course 100 Class Application*

**This PDF form may be filled out online.**
**Once it is filled out and signed, choose file / print.**
**Then fax it to 780-462-0633**

To use this form, click below the field name and a curser will appear. Type the information for that field. To move to the next field press the tab key. You may also select a field by clicking in that field with the mouse.

**Name of Applicant**

| Last | First | Registration Number | Date of Birth mm/dd/yyyy) |
|---|---|---|---|
| | | | |

**Residence Address**

_____ Street Address

_____ City or Municipality

_____ Province and Postal Code

Phone #: (____)_____ Bus/Cell #: (____)_____ Fax #: (____)_____

**Mailing Address (If different from above)**

_____ Street Address or Box Number

_____ City or Municipality

_____ Province and Postal Code

**Course Registration Choices**

**Location (Calgary, Edmonton, Lethbridge, Grande Prairie Red Deer )** Edmonton

**Course Date Choice – List at least two choices**

**Course Confirmation will be faxed and then mailed with your receipt to your home address**

I authorize payment for the fees by the method listed below:

Salesperson Course fees are $ 160.00 (Tax in) $_____
Salesperson Annual Registration fees $ 100.00 (Tax exempt) $_____
Total: $_____
0.00

☐ Visa ☐ MasterCard ☐ Cheque ☐ Money Order

**CREDIT CARD NUMBER** ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ **EXPIRATION DATE** ☐☐/☐☐

**CARD HOLDER'S NAME** _____

**CARDHOLDER SIGNATURE** _____

Suite #303, 9945 – 50 Street Edmonton, Alberta T6A 0L4 Licensing 1-877-979-8100 or Edmonton 1-780-466-1140 Extension # 2 Fax 1-780-462-0633

Revised 03/15/2005