

**Pre-Licensing Course
Student Enrollment Application
Home Inspection Training Services**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ E-Mail: _____

Social Security # _____

Session applying for: (Classes are held over two, 3-day weekends (Fri, Sat, Sun) so you miss less work.)

2009 Weekend Classes:

Feb. 20, 21, 22 & Feb. 27, 28, March 1	_____	\$1990
April 24, 25, 26 & May 1, 2, 3	_____	\$1990
Sept. 11, 12, 13 & Sept. 18, 19, 20	_____	\$1990
Dec. 4, 5, 6, & Dec. 11, 12, 13	_____	\$1990

To reserve a seat, a non-refundable \$400 deposit is required. Please enclose a check or money order made out to *Home Inspection Training Service* along with this application. If you wish to pay by credit card please print a Visa or Master Card number on the line below. If the class is cancelled at the discretion of Home Inspection Training Services, all deposits will be fully refunded. The balance of the fee is due on the first day of the class. **If you choose to finance the full cost of the course with SLM Financial the \$400 deposit will be returned to you on the first day of class.**

Check , Visa , Master Card , Voucher

Card # _____ Expiration Date _____

- Please bill my credit card for the full amount: \$1990.00 _____
- Please bill my credit card for the deposit amount: \$400.00 _____
- I am financing through SLM Financial: \$400.00 _____

Signature: _____ Date: _____

Send Application to:
Home Inspection Training Services
700 N. Lake St., Suite 201 - Mundelein, IL. 60060
Fax: (847) 566-6333 Phone: (847) 217-5958

Office Use Only: Deposit Amt. _____ Balance _____