

# F9 Web Training Registration



Instructions: Please complete the form below and submit a signed copy via fax to 1(604) 688-4092 or scan the signed copy and attach to an email to [training@f9.com](mailto:training@f9.com). Incomplete forms will not be processed. \*Required field.

## Client Information:

Company Name (include any alternates)*:			
Contact Name*:			
Street Address*:		City*:	
State/Province*:	Zip/Postal Code*:	Country*:	
Work Phone*:		Fax:	
E-Mail*:		Website:	

## Product Information:

Accounting System:		Accounting Version:	
F9 Version Currently Using*:		Number of F9 Users on Site:	
F9 Date of Purchase:	Currently on F9 Maintenance*: [ ] Yes [ ] No [ ] Unknown	You must be on maintenance to book training. If your F9 maintenance contract has lapsed, please email <a href="mailto:renewal@f9.com">renewal@f9.com</a> to reactivate your support.	

## Reason for F9 Training?

- New User
- Re-fresh Training
- Learn more advanced features
- New accounting system

Demo and sell as a Reseller

Other: \_\_\_\_\_

## How did you learn about F9 Training?

- F9 Website
- F9 Partner
- F9 Sales
- Other: \_\_\_\_\_

Notes: \_\_\_\_\_

**Fast Track F9 Fundamentals**, four (4) hour course via web with live instructor.

- \$750 USD per person without software purchase (\$599 USD per person with software purchase) - charged at time of booking
- \$99 USD F9 Courseware software and training manual (one set included with booking; additional copies sold separately)

Once payment has been processed, your training booking will be confirmed. Please note that we only accept a limited number of students per session. If you miss your class, you must re-book and re-purchase. You may reschedule your class with a seven-day written notice. This will allow us to offer your seat to another participant. Your signature below authorizes us to bill your stated payment method with the above course fee. If you require further information, please email [training@f9.com](mailto:training@f9.com) or call 1 (604) 699-3317, 9-5pm pacific standard time.

## Accepted Payment Methods:

By Credit Card (Visa, MasterCard, AmericanExpress)	All fees charged in US Dollars
Please fill out the attached credit card authorization form	
Will you require a copy of this invoice for your records? (check one)	[ ] YES [ ] NO
Signature of Approval: _____	



## Credit Card Authorization Form

### Card Details:

<input type="checkbox"/> Amex	Card #:		
<input type="checkbox"/> Visa	Expiration Date:		
<input type="checkbox"/> Mastercard	\$ Amount:	<input type="checkbox"/> USD	<input type="checkbox"/> CAD
3-Digit Security Code:			

### Billing Details:

Cardholder Name (company or individual name): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Payment Details:

Invoice #:	\$ Amt:
Invoice #:	\$ Amt:

Signature or typed name below indicates authorization for Infor Global Solutions to charge my credit card for the amounts listed above.

\_\_\_\_\_  
Signature Date

### Request Submitted By:

Full Name: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Routing:

Please indicate payment type below and submit completed forms as indicated:

- Payment for new orders
- Payment for existing invoices