08/09

CIT
164 WANDA
WALLED LAKE, MICHIGAN 48390

REGISTRATION FORM:

REGISTRATION AT 1:45 PM
CLASS BEGINS AT 2 PM

NAME: ____ DATE: __________

ADDRESS: ______________________/____________ MICHIGAN ____________
City Zip Code

TELEPHONE-BUSINESS (   )________________ E-Mail____________________

STATE INSPECTOR REGISTRATION NUMBER: __________________________

******** CLASS FEE: $80.00 MECH. INSP. SPECIALTY/ADMIN CLASS: 08/25/09

CIT- 164 Wanda, Walled Lake, MI 48390 **Office/Fax: 248-624-0570 Cell: 586-436-0450**

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