



C O R P O R A T I O N

Excavation Safety Competent Person Course

Registration and Payment Form

Requested Class Date:

Company Name:

Billing Address:

City/State Zip:

Contact Name:

Contact Phone #:

Contact Fax #:

Contact Email:

Please register the following people:

Payment Options: PO#: _____ Check: PayPal:

To pay with PayPal / Credit Card option please list email address where request should be sent to: _____

Please return this form to Training Coordinator at
training@speedshore.com or via fax to 713-943-8483

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