



## SERVSAFE ESSENTIALS REGISTRATION FORM

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

Facility: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Number: \_\_\_\_\_

Check which Training Session you will attend:

Check One	Location	Date
<input type="checkbox"/>	Tallahassee	August 18-19, 2005
<input type="checkbox"/>	West Palm Beach	September 1-2, 2005
<input type="checkbox"/>	Miami	September 14-15, 2005
<input type="checkbox"/>	Altamonte Springs	September 19-20, 2005
<input type="checkbox"/>	St. Petersburg	September 21-22, 2005

**NOTE: The class is limited to 35 pupils. Please register early to assure yourself a spot in the class.**

Return completed registration form to:

**Christell Everett**

**Fax:** 850-414-2194 OR

**Mail:** ACFP, 4040 Esplanade Way, Tallahassee, Florida 32399-7000