



North Hennepin
Community College

Adult Education & Training

Corporate Training Membership Application Form

Company Name _____

Contact Name _____ Contact Title _____

Contact Phone Number _____ Contact Fax _____

Contact Email _____

Billing Address _____

The training membership has several options to choose from: *please check one*

- 16 units @ \$2,000
- 32 units @ \$4,000
- 60 units @ \$7,500
- 100 units @ \$11,500*

- Each unit is valued at \$125.00
**100+ units are discounted an additional 10%*
- One training unit is equivalent to an 8-hour class. Partial units cannot be applied (Example: 4-hour training session). Registration can help determine the number of units per scheduled class if needed.
- Membership cannot be applied towards Online classes or the Regulatory Affairs Certificate (*please call your Program Director for special pricing*)

I understand the purchase of training units is non-refundable and is valid for one calendar year. Units not utilized at the end of the calendar year cannot be rolled over. The authorized signature of the "responsible party" is required for enrollment approval of all participants.

In the next few weeks after payment and this application form is processed, you will receive a welcome letter along with a four-digit code electronically. Upon receiving that 4-digit Identification Number (ID Number), your membership will be effective immediately. You may begin using your training units anytime, the units cannot be transferred to previously paid classes.

In case of cancellation made by North Hennepin Community College or if the class is full when registration is received, a credit to your membership account will be made. Class rescheduling must be done three full business days before the class start date. No class rescheduling will be allowed for notices of less than three full business days.

Effective Start Date: _____ (month/year)

Authorized signature of Responsible Party

Printed name of Responsible Party

Date

Please mail signed Membership Application Form to:

North Hennepin Community College-AET
7411 85th Avenue North
Brooklyn Park, MN 55445
Fax (763) 424-0889

To be completed by authorized party:
Company ID Number: _____
CT Representative: _____
Payment rec'd: <input type="checkbox"/> yes <input type="checkbox"/> no
Date payment rec'd: _____
Expected date of payment: _____