



Registration Form

“Customer Point of View Workshop”

____Orlando September 9

____Pompano Beach September 11

Company_____

Address_____

Email_____

Phone_____

Name_____

Name_____

Name_____

Name_____

\$ 50.00 x _____ = \$ _____

Credit Card

___Visa ___Mastercard ___Amex ___Check (Payable: Segura & Associates)

Card #_____

Name on Card_____

Expiration Date_____

Sec. Code_____

Address_____
