



AERIAL WORK PLATFORM SAFETY CLASS REGISTRATION

Scissor Lifts, Boom Lifts & Elevated Work Platforms

For confirmation, return completed registration form to Atlas Training Department
Email to: Training@AtlasToyota.com or Fax to: (708) 496-2391

Today's date: _____ Date of requested class: _____

Address: 6400 W. 73rd St. Bedford Park, IL 60638 Time of Class: 8:00am - Noon

Company: _____ Phone: _____

Address: _____ Email: _____

City: _____ State: _____ Zip code: _____

If you have an account with Atlas would you like us to invoice this account? _____

Atlas account # _____ PO # _____

Or charge Credit Card # _____ Exp. Date: ____/____/____

Security code: _____ Billing zip code: _____

Certified check or Money Order made out to The Atlas Companies also accepted.

AWP OPERATOR SAFETY TRAINING CLASS: \$150.00 Per Person

Attendees: 1. _____

2. _____

3. _____

4. _____

5. _____

Person authorizing training: _____
(print name clearly)

Signature: _____