



Student Enrollment Form

Class Date: _____

Course #: _____

Company: _____

Phone #: (_____) _____ Fax #: (_____) _____

Student #1: _____ Title: _____

Student #2: _____ Title: _____

Student #3: _____ Title: _____

PO #: _____ For the sum of \$ _____

The student will make his / her own travel arrangements.
The following rates apply to several hotels near our facility. Ask for corporate rate
under Perkins Pacific when registering.

Hotels listed have continental breakfast / high speed internet access.

Comfort Inn Suites: Ph. 360-253-3100 Rate: \$64.80 + tax

Ramada: Ph. 360-253-5000 Rate: \$59.00 + tax

Sleep Inn: 360-254-0900 Rate: \$52.00 + tax

Please return this form by fax to: 360-887-5901

Attn.: Warren Pyle