

# TOWING & RECOVERY

## ASSOCIATION OF WASHINGTON

*"The Power of a Team"*

### **2021 LIGHT DUTY CLASS REGISTRATION**

Complete form. Choose dates preferred. Email to [register.towingandrecoveryofwa@gmail.com](mailto:register.towingandrecoveryofwa@gmail.com). We will contact you with class date and payment request when student is added to roster. Student ID will be required for verification purposes. First come, first serve. 2 students per form; complete additional forms if necessary. Questions: Emily, 206-446-5960

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

Company Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Email: \_\_\_\_\_

1<sup>st</sup> Student's Full Name: \_\_\_\_\_

2<sup>nd</sup> Student's Name: \_\_\_\_\_

1<sup>st</sup> Student's Cell: \_\_\_\_\_ 2<sup>nd</sup> Student's Cell: \_\_\_\_\_

1<sup>st</sup> Student's Email: \_\_\_\_\_

2<sup>nd</sup> Student's Email: \_\_\_\_\_

#### **Class Choice:**

1<sup>st</sup> Choice (Date & Hands-on location): \_\_\_\_\_

2<sup>nd</sup> Choice (Date & Hands-on location): \_\_\_\_\_

3<sup>rd</sup> Choice (Date & Hands-on location): \_\_\_\_\_

**Price: \$250 for members / \$375 non-members**

**Circle your choice:**    **CHECK INCLUDED**    *OR*    **CREDIT CARD PAYMENT** (T.R.A.W. Office will contact you)

Printed name on card: \_\_\_\_\_ Billing zip code: \_\_\_\_\_

Signature on card: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Mailing: T.R.A.W., P.O. Box 25174, Seattle, WA 98165 - Fax: (206) 364-3111**

**Questions? Call Emily Wade, AD: Cell: 206-446-5960 or Office: (206) 492-5032**

**contact email: [towingandrecoveryofwa@gmail.com](mailto:towingandrecoveryofwa@gmail.com)**

**registration email: [register.towingandrecoveryofwa@gmail.com](mailto:register.towingandrecoveryofwa@gmail.com)**