



Termark Technical Institute

Post Office Box 670326 – Coral Springs, Florida 33067-0006
Phone (954) 979-4480 – Toll Free (855) 4-TERMARK – Fax (954) 979-0456
Web: <http://www.termark-tech.org> - E-Mail: training@termark-tech.org

Student Online Enrollment Form

Student Name: _____
Required Information

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Ph: _____
Required Information

Fax: _____ E-Mail: _____
Required Information

Log On Selected: _____ Password: _____
Required Information

Class Name: _____
Required Information

Student Signature: _____
Required Information

Course Tuition Costs \$ _____

Method of Payment

Company Check Money Order Cashier's Check

Log-on and Password will be provided to student when payment processed

Discover Card Master Card Visa Card

Log-on and Password will be provided to student within 48 hours of receipt

Card Expires ___ / ___ Name on Card _____

Credit Card Billing Address: _____

Last 3 Digit Code on Back Signature Block

City: _____ State: _____ Zip: _____ CID Code: _____

I hereby authorize The Susquehanna Group LLC d/b/a Termark Technical Institute to charge the aforementioned credit card the amount of tuition stated above and I understand that tuition fees are non-refundable. I understand that if the student cited above fails to complete the course or any portion thereof, any practice exams, complete course within defined timeframe or attempt to violate copyright law by copying or disseminating any portion of this course by any means whatsoever information contained in the course for the benefit of anyone other than the registered student. Any violation will be cause for action by the school for dropping the student from the online course and terminating there ability to log on. No warranties are expressed and neither the student nor employer is entitled to consequential or punitive damages under any theory. Certificates of Completion will be issued at the conclusion of the course

Cardholder Signature: _____