



ALL-TEST Pro, LLC Training Registration Form

1. Select Training Course

- 10010: 3 Day MCA MDW Level I - \$1,780.00
- 10041: 3 Day MCA MDW Level II - \$1,930.00
- 10011: 2.5 Day ESA MDW Level I - \$1,780.00
- 10042: 2.5 Day ESA MDW Level II - \$1,930.00
- 10012: 5 Day MCA & ESA MDW Level I - \$2,400.00
- 10038: 5 Day MCA & ESA MDW Level II - \$2,550.00

2. Select Location

- Houston, TX: March 25-29, 2019 (Level I)
- Edmonton, CAN: May 6-10, 2019 (Level I)
- San Francisco, CA: June 3-7, 2019 (Level I)
- Chicago, IL: Sept. 9-13, 2019 (Level I)
- Las Vegas, NV: Dec. 9-13, 2019 (Level II)

Sales Representative / Distributor: _____

3. Participant Contact Details

First Name: _____ Last Name: _____ Suffix: _____

Company: _____ Title: _____

Address: _____

City: _____ ST/Prov: _____ Zip/Postal: _____ Country: _____

Email: _____ Phone: _____

4. Payment

Payment Method: _____ **Promo Code: _____ Total Cost: _____

Training Policies

Payment: Payment must be made in advance of training. ATP will contact you to discuss payment methods. Checks should be written to ALL-TEST Pro, LLC. Cash payments will not be accepted. Credit cards will be charged upon receipt to secure your seat at the seminar.

NOTE: Sales Tax may apply (US and Canada). You may provide a tax exemption certificate if sales tax does not apply to you.

Confirmation: ATP will email you a registration confirmation within 3 business days of submission. You will not be registered for the course until your confirmation is sent. If you do not receive a registration confirmation, please contact our Training Department at (860) 399-4222.

Cancellation: ATP must be notified of any cancellations at least 10 business days prior to the start of the course. If you have an emergency and cannot attend the training, please contact our office at (860) 399-4222 and we will be happy to re-book you for a future course.

Refund: ATP will not issue any refunds once a course begins. If you have an emergency and cannot attend the course, you are registered for ATP will issue you a credit memo to be used toward a future course.

**Only verified attendees will qualify for certain special discounts.

Return completed form by email or fax to: CE@alltestpro.com or (860) 399-3180



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Please take a moment to complete the pre-course evaluation below. This information will help us determine your current experience and allow us to customize our course for your maximum benefit.

Experience

What type of program are you currently using for motor testing?

How long have you worked in the predictive maintenance field? _____

Do you have any questions you would like the instructor to address in this course? _____

Equipment

Are you currently using motor testing equipment? _____

If so, what type of equipment are you using? _____

Are you currently using any of the following ATP equipment & software? _____

ALL-TEST PRO 5™ Serial Number: _____

ALL-TEST PRO 31™ Serial Number: _____

ALL-TEST IV PRO™ Serial Number: _____

ALL-TEST PRO 33 IND™ Serial Number: _____

MOTOR GENIE® Serial Number: _____

ALL-TEST PRO On-Line II™ Serial Number: _____

Condition Calculator™ Version: _____

TREND™ Version: _____

EMCAT PRO® Version: _____

ESA* Version: _____

MCA PRO™ Version: _____

MCA Basic™ Version: _____

*You may be eligible for a free upgrade. Please contact us for details.

Providing us with this information allows us to track our users and notify them of product recalls, software upgrades and helpful technical bulletins. If you would like to receive this information, or information about User Group Meetings and other technical presentations, please check here:

We will contact you via email periodically with updates. All information will remain confidential. ALL-TEST Pro, LLC does not distribute or sell our contact lists to any 3rd party marketers.