

PLEASE RETURN VIA FAX TO (617) 876-2617.

QTY	DESCRIPTION	AMOUNT
	Module One: Fundamentals	USD \$ 740
	Module Two: Policy & Strategy	USD \$ 845
	Both Modules	USD \$ 1,380
TOTAL:		USD \$

This form is to be completed by the cardholder.

- VISA
 MASTERCARD
 AMEX

For billing questions, please contact AIRINC Accounting:

Tel: +1 617 354-2133
 Email: invoicing@air-inc.com

NAME (please PRINT name as it appears on card)

COMPANY NAME

PHONE NUMBER

Cardholder acknowledges receipt of goods and/or services in the amount of the TOTAL shown hereon; and agrees to adhere to the obligations set forth in the Cardholder's Agreement with the Card Issuer.

CREDIT CARD NUMBER

CARD EXPIRES

CARDHOLDER SIGNATURE

TODAY'S DATE