



**CLASS START DATE** \_\_\_\_\_

**COURSE** \_\_\_\_\_

**COST \$** \_\_\_\_\_

**Participant Information**

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Phone (\_\_\_\_)** \_\_\_\_\_

**E-Mail** \_\_\_\_\_

**This class needs a minimum of 8 people to start and a maximum of 15.**

**Complete the form and mail with your check to:**  
**Central FI Electrical JATC**  
**2738 Forsyth Road**  
**Winter Park, FL 32792**