

ServSafe® Registration Form

Attendee Information

First Name:	Last Name:				
Telephone:	Fax:				
Email:					
	Class Date (2 nd Choice):				
Primary Address					
Is this your home or workplace	e? (please check one)				
Address:					
City:					
State:	Zip Code:				
Secondary Address (for shipping	ng course materials elsewhere):				
Is this your home or workplace	ce? (please check one)				
Address:					
City:					
State:	Zip Code:				
Payee Info	ormation (If Different From Attendee)				
First Name:	Last Name:				
Telephone:	Fax:				
Email:					
Title/Position:					
Company:					
Address:					
City:					
State:	Zip Code:				

Item #	Product/Service Item	Cost/Attendee	Subtotals			
	ServSafe® Food Protection Manager Certification & Examination					
Α	One-Day In Person Class	\$165.00				
В	Online Training	\$185.00				
	ServSafe® Food Protection Manager Examinations					
С	Paper Answer Sheet	\$36.00				
D	Online Voucher	\$38.00				
E	Proctor Service – Group Session	\$30.00				
F	Proctor Service– Private Session	\$35.00				
G	Re-Test	\$90.00				
	Books					
Н	ServSafe® Essentials, 5th Edition	\$60.00				
		TOTAL				

Please mail in with your check, payable to **Trelfa Labs, Inc.,** to the following address:

Attn: ServSafe Trainer/Proctor					
Trelfa Labs, Inc.					
19 Central St., Unit A, Byfield, MA 01922					

For Trelfa Labs, Inc. Office Use Only

Registration Date: _____

Paid Via:	Cash	Check	Paypal
Class Dates:	Confirmed	Rescheduled	Attended
Supplies:	Ordered	Received	Shipped
Certificate:	Passed	Shipped	Retest Needed