

LexTech, Inc

AFGROW TRAINING CLASS REGISTRATION
21-23 September 2010

Phone: 937-438-0300

Fax: 888-414-8208

NAME _____ COMPANY _____

PHONE _____ EMAIL _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

The registration fee \$595.00/person until August 15, \$635.00/person thereafter is payable to LexTech, Inc. Payment methods: VISA, MasterCard, Discover or Check. Please make checks payable to LexTech, Inc.

Cancellation Policy: Cancellations before August 15, 2010 will receive a 50% refund or full credit toward a class held in 2011. Cancellations after August 15, 2010 may only receive full credit for a class held in 2011.

Credit Card Information

I _____ Authorize LexTech, Inc to charge my credit card
(NAME)
for services rendered. Not to exceed the amount shown.

AMOUNT \$ _____ USD BILLING ADDRESS _____

CREDIT CARD TYPE _____

CREDIT CARD # _____ BILLING ZIP CODE _____

CARD CV2 # _____ NAME ON CARD _____

(As it appears on card)

EXPIRATION DATE _____

SIGNATURE _____

DATE _____

MAIL TO:
LexTech, Inc
AFGROW Training
8285 Rhine Way
Centerville, OH 45458

OR FAX TO:
1-888-414-8208

Receipt of payment will be disseminated electronically to the email address that is provided. Please ensure that the registration information contains a current email address to ensure proper receipt of all confirmations and updates regarding this class.