

# MARINE SYSTEMS TRAINING CENTER

## Course Registration Form

To register for any course offered at the MSTC please complete this form and return it with your payment.

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

---

Course Requested: \_\_\_\_\_

Date: \_\_\_\_\_

Name(s) of Participant(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tuition Amount: \$ \_\_\_\_\_ X No. of Participants \_\_\_\_\_ = Tot. Tuition for this Course \$ \_\_\_\_\_

---

Course Requested: \_\_\_\_\_

Date: \_\_\_\_\_

Name(s) of Participant(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tuition Amount: \$ \_\_\_\_\_ X No. of Participants \_\_\_\_\_ = Tot. Tuition for this Course \$ \_\_\_\_\_

---

Course Requested: \_\_\_\_\_

Date: \_\_\_\_\_

Name(s) of Participant(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tuition Amount: \$ \_\_\_\_\_ X No. of Participants \_\_\_\_\_ = Tot. Tuition for this Course \$ \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** (all courses) = \$ \_\_\_\_\_

**PLEASE NOTE:** You may use this form to register for more than one course. Please provide all requested information. Payment in full will secure your registration(s). E-mail confirmation will be sent upon receipt of completed form and payment. Please make checks payable and mail to:

**Marine Systems Training Center**

60 Main Street

Thomaston, ME 04861

[info@marinesystemstraining.com](mailto:info@marinesystemstraining.com)

207.354.8803