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Training Registration Form

Ver2APR2011

STUDENT NAME												REQUEST DATE											
COMPANY NAME																							
COMPANY ADDRESS																							
BUSINESS TELEPHONE						BUSINESS FAX																	
EMAIL ADDRESS																							
Daikin AC University Classroom Training																							
COURSE NAME												COURSE CODE											
TRAINING LOCATION: CITY & STATE												START DATE OF CLASS											
Web-Based Training Coupon Request COUPONS EXPIRE WITHIN 90 DAYS OF ISSUE DATE																							
PRICE PER COURSE: \$20						FULL SUBSCRIPTION PRICE: \$399																	
QUANTITY OF COURSES REQUESTED						OR						CHECK BOX BELOW											
INTERNAL USE ONLY																							
DATE OF ISSUE / EFFECTIVE DATE												EXPIRATION DATE OF COUPONS											
INVOICE AMOUNT												DATE OF INVOICE											
DATE PAYMENT RECEIVED												DATE PAYMENT PROCESSED											

* List your name as you would like it to appear on a certificate of completion
 Return completed form along with payment / credit card authorization to: training@daikinac.com.