

## Protect-All® Request Form 2025 Training Registration Request Form

Company Name:	
Trainee Name(s):	
Contact Name:	E-mail:
Address:	Phone:
City, State, ZIP:	
Class Selection	
Listed below are the scheduled in-house class da	ites for 2025.
Jan. 🗆 7 🗆 8 Feb. 🗆 4 🗆 5 March 🗆 4 🗅 5	5 <b>April</b> □1 □ 2 □ 29 □ 30 <b>June</b> □ 3 □ 4
<b>July</b> □ 1 □ 2 □ 29 □ 30 <b>Sept.</b> □ 2 □ 3 □ 30	<b>Oct.</b> □1 <b>Nov.</b> □4 □5 <b>Dec.</b> □2 □3
<b>Payment</b> The cost of the class is \$250 per person. Your pa requested training dates. There will be a \$100 fee scheduled training date.	
Hotel	
<ul> <li>be provided by Protect-All® at a local hotel of out two nights for a one-day training or three nights required upon check-in to cover additional experesponsible for additional room expenses.</li> <li>Michigan is a smoke-free state; smoking is prowill result in a \$200 fine.</li> <li>If you will be flying into Michigan, please indice o MBS (Midland, Bay City, Saginaw) 1.5- to o FNT (Flint Bishop International) 2-hour of APN (Alpena) 1.5- to 2-hour drive to Protect-O Driving directions can also be sent if requesterable and confirmations and correspondence will be sentered.</li> </ul>	for a two-day training. Note: A credit card will be enses. Under no circumstances will Protect-All be chibited indoors. The penalty for breaking this law cate which airport you will be arriving at. 2-hour drive to Protect-All. drive to Protect-All. drive to Protect-All. dect-All.
PROTECT-ALL USE ONLY	
Confirmed Date: Distribut	cor/Reg. Sale Manager Approval:
Hotel Confirmation:	Check-In: Check-Out:
Payment Amount:	
Comments:	Date Reserved:

Please return your completed form with deposit to: Oscoda Plastics

5585 N. Huron Ave. Oscoda, MI 48750