



Mi-Co Training Registration Form

Please mail or fax completed application to:

Address: Mi-Co
Attn: Training
4601 Creekstone Drive Suite 102
Durham, NC 27703

Fax: (866) 610-1942
Attn: Training

Training date:

Training topics (check all that apply):

- Mi-Forms Client
- Mi-Forms Designer
- Mi-Forms Server
- Mobile Web Forms
- Mi-Forms and the Digital Pen

Contact Information

First Name		Middle Initial	Last Name	
Job Title			Company Name	
Mailing Address				
City		State/Province	ZIP/Postal Code	
Country	Phone	Fax		
Email				

Payment Information

Payment Method:					
Check	Wire Transfer	VISA	MASTERCARD	AMERICAN EXPRESS	DISCOVER
Card Number			Expiration Date	CVV2 Code	
I hereby authorize Mi-Co to charge my credit card.					
_____ Cardholder's Signature					

You will receive confirmation by email (if provided) or US Mail once your registration has been processed. Please contact Mi-Co if you have questions.

◇ info@mi-corporation.com ◇ 919.485.4819 ◇

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