

# Class Registration Form

To register, please complete and print this form and FAX it to NVMS at (703) 246-8992 or MAIL with check or government purchase order to the address below.

Northern Virginia Mediation Service  
4041 University Drive, Suite 101  
Fairfax, VA  
22030

Training Program  
Phone: 703-865-7261  
Fax: 703-246-8992  
training@nvms.us

## Registrant Information

<b>Name:</b>	
<b>Organization:</b>	
<b>Address:</b>	
<b>State/Province:</b>	
<b>Zip/Postal Code:</b>	
<b>Day Phone:</b>	
<b>Email:</b>	
<b>Eve Phone:</b>	

## Payment Information

Check Check Number

Purchase Order  
(Please contact office for details)

Credit Card

**Mastercard**

**American Express**

**Visa**

**Card Number:**

**Expiration Date:**

## Cardholder Information (if different from registrant)

**Name:**

**Billing Address:**

**State/Province:**

**Zip/Postal Code:**

**Day Phone:**

Would you like to join our mailing list?

How did you hear about us?  
(Check all that apply)

NVMS Website

Yellow Pages

Email

Referral

Other: \_\_\_\_\_

Class	Date	Cost

Total Registration Cost: