



Business Account Application

I request a National Hospitality Training business authorization code be created for my business or organization. I understand that completion of this application will result in my company/organization receiving a unique code that my employees can use to access training courses via a computer with modem/internet access.

After processing this application, 360Training/Learn2Serve will issue my company an authorization code. I understand that it is my responsibility to inform current/prospective employees of this code and that I am responsible for payment of all certificates issued to trainees via this code. 360Training will provide a report of all certifications and employee names prior to charging/billing your account for verification purposes.

Please clearly type/print application information. Credit card information will remain on file and may be charged only if the billing account is delinquent. A valid credit card number is required to process this application. Please allow up to 3 business days for processing. Authorization codes will only be given to the contact person listed on this form.

Thank you for using www.wisconsinbartenderlicense.com for your training needs!

Official Corporation Name: _____

Company Account Name: _____

Type of Business: Sole Proprietorship Corporation Partnership LLC

Federal Employer Identification No.: _____

Local State Taxpayer no: _____

Company Credit Card: Visa MasterCard American Express Discover

Account Number: _____ - _____ - _____ - _____ **Expiration Date:** ____/____

Payment: You will receive an invoice each month and payment is due within 10 days.

Billing Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Billing Attention: _____

Shipping Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Company Website: _____

Phone #: _____ **Fax #:** _____

Contact Name: _____ **Contact Email:** _____

Contact Person Signature: _____

PLEASE COMPLETE AND FAX BACK TO 513-542-3513