



# 2010 Louisiana Tow Sheaux



## TOWING & RECOVERY PROFESSIONALS OF LOUISIANA PERMIT TO SELL CLASS

Please complete the following information:

Company: \_\_\_\_\_ TRPL Account #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Please list the name of everyone attending from your company:

1<sup>st</sup> Attendee Name: \_\_\_\_\_ 2<sup>nd</sup> Attendee Name: \_\_\_\_\_

3<sup>rd</sup> Attendee Name: \_\_\_\_\_ 4<sup>th</sup> Attendee Name: \_\_\_\_\_

5<sup>th</sup> Attendee Name: \_\_\_\_\_ 6<sup>th</sup> Attendee Name: \_\_\_\_\_

**LOCATION: Baton Rouge River Center**

**DATE** (please select date preference)

March 19<sup>th</sup> @ 9a     March 20<sup>th</sup> @ 9a

**Registrations must be received NO LATER than Monday, March 15, 2010!**

**PLEASE CHECK ONE:**  TRPL Members - \$20     Others - \$40

**# of attendees** \_\_\_\_\_    **Total payment amount \$** \_\_\_\_\_

### PAYMENT INFORMATION

- Check (Make check payable to: TRPL Tow Sheaux)
- Money Order
- Credit Card (circle one): Visa / MasterCard / AMEX / Discover

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Exp: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Fax completed form to 888-411-0909 or mail form with payment to:

PO Box 46478

Baton Rouge, LA 70895

For any additional information call 800-349-TRPL (8775)