



GROUP ENROLLMENT APPLICATION FORM

This application is to request an OSHA.com / 360training.com, Inc. ("360") group enrollment for online courses. Acceptance of this application allows 360 to charge the credit card of _____ ("Client") for course purchases online versus end users providing payment.

After approval and processing of this application, 360 will contact the Client to obtain student/employee information, including names, email addresses, and course(s). 360 will charge the Client's credit card for the courses and issue the Client username and password information for the courses. It will be the responsibility of the Client to inform their employees of their usernames and passwords.

Please print the following information and allow five (5) days for processing of this application from receipt by 360. Username and password information will only be given to the contact person listed on this form and is subject to change.

COMPANY NAME: _____

TYPE OF BUSINESS (please check): Partnership Sole Proprietorship
 LLC Corporation

STATE OF REGISTRATION: _____

Federal Employer Identification No. or Local State Taxpayer No.: _____

DUNS NUMBER: _____

