# AUTHORIZATION TO BILL

WEST VIRGINIA PUBLIC SERVICE TRAINING - CLARKSBURG

AUTHORIZATION TO BILL FOR: Emergency Services Instructor

THIS FORM MUST BE RETURNED TO THE COURSE INSTRUCTOR AT THE CLASS SESSION







Registration $ 300 (includes textbook)

Course Textbook (Optional) \_$ \_

TOTAL FEES per student $ 300

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Please list the student names and check the appropriate boxes:

|  |  |  |  |
| --- | --- | --- | --- |
| Student Name: First, Middle, Last please print clearly | Tuition | Book | Total |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| 6. |  |  |  |

I hereby authorize WV Public Service Training to invoice the above named agency for registration, lab fees,

and book fees associated with this course for all students listed. Payment will be made in full via

department/ agency check or money order payable to Mountain State Educational Service Agency (MSESC)

upon receipt of invoice.

Authorized Agency Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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