

Company Enrollment Form – Page 1 of 2

Section 1: Company In	formation				
Company Name:					
DOT #:					
Company Address:					
City:					
State:					
ZIP:					
Company Phone:					
Company Website:					
Primary Contact Person:					
Position/Title:					
Contact Email:					
Contact Phone:					
Section 2: Enrollment [Details				
Number of Drivers to Enroll	ı:				
Preferred Class Format (Se Pricing (total per class): 1		,350 (2 students) • 1-to	-3: \$6,075 (3 students)		
1-to-1 (Private) –	1-to-1 (Private) - \$3,325 total (1 student/class)				
1-to-2 (Small Group) -\$5,350 total (2 students/class)					
1-to-3 (Group) –	\$6,075 total (3 students	s/class)			
Preferred Start Date:		Preferred Class Day 8	& Time:		
Section 3: Driver Inform	nation				
Enter details for up to three of Driver 1 Full Name:	drivers:	Language:			
CDL State:	Email:		Phone:		
Driver 2 Full Name:		Language:			
CDL State:	Email:		Phone:		
Driver 3 Full Name:		Language:			
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Section 4: Payment Information – Bank Transfer Only

Please complete you	bank transfer	using the	following details:
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Bank Name: Pathward, N.A. Routing Number: 073972181

Account Number: 70002006980238

Account Type: Checking

After payment, please email confirmation to pete@TruckersEnglishCourse.com.

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I authorize	TruckersE	nglishCours	e.com to er	roll the liste	d drivers	into the	26-week	English	Compliance	Program.
Authorized	Company	Representa	itive:							

Title:	Signature:	Date: