



STAUF UNIVERSITY REGISTRATION FORM

Please complete and email form to training@staufusa.com

each attendee must complete a form

Name: _____

Address: _____

Phone: _____

E mail: _____

School dates applied for: _____

Arriving By: Car Air (Please send itinerary as soon as available)

Hotel Room Needed? Yes No T-Shirt Size: _____

Any Disabilities/Food Allergies we should know of? _____

Please check one: Distributor Installer Retailer

Name of Company/Title: _____

Please visit www.staufusa.com for STAUF University FAQs

STAUF University Location: 835 Herbert Road, Cordova, TN 38018

CREDIT CARD ON FILE

(card required only for purposes of holding your registration and any incidental charges)

Name on Card: _____

Card Number: _____

Billing Address: _____

Exp. Date: _____ CVV Code: _____

The signed cardholder authorizes STAUF USA Adhesives, LLC. to charge this credit card for any incidental charges
(Please see www.staufusa.com for STAUF University cancellation policy)

Signature: _____ Date: _____