



Alabama Locksmith Association
1607 Martin Street South Suite 10
Pell City AL 35128
205-552-8200
Locksmithala.org
Beginner Class Course

Name: _____ DOB: _____

Address: _____ City: _____ ST: _____ Zip: _____

Email: _____ Phone Number: _____

Month requesting to attend the Beginner Locksmith Course at Alabama Locksmith Association: _____ Year: _____

1. I understand the course is \$975.00.
2. I understand the course must be paid in full no later than 30 days from the first day of class to secure my seat.
3. If I am unable to attend the course, I understand I can get a full refund if I cancel 30 days prior to first day of class.
4. If I am unable to attend the course, I understand from 3 weeks to beginning of class I will get \$731.25 refund.
5. If I am unable to attend the course, I understand from 2 weeks to beginning of class I will get \$487.50 refund.
6. If I am unable to attend the course, I understand from 1 week to beginning of class I will get \$243.75 refund.
7. If I am unable to attend the course, I understand from 1 week to beginning of class I will not get a refund.
8. I do have the option to move to the next class available instead of a refund. In all cases.
9. Alabama Locksmith Association has the right to change a class if there is not enough students to meet requirements. We will move all students to next upcoming class.

Print Name

Signature

Date