

2021 REGISTRATION FORM MERIT SHOP TRAINING, INC. (MSTI)

TO BE COMPLETED BY STUDENT/PLEASE PRINT

Name	Date of Birth_	Birth City
Address	City/State	Zip
Phone No	Social Security	No
NCCER Card No	Email	
Supervisor	Employer	
ID# to my employer, MSTI and ABC of Texas release my grades, attendance records, NCCE Coast, Inc. I also consent to use of my photo In consideration for the voluntary training pagree to accept all responsibility and liability	lled; OR have Visit https:// udent-life/ on. lease my grade Gulf Coast, In- ER # and stude ograph from an orogram offere ty for any and	nt ID# to my employer and ABC of Texas Gulf y MSTI and ABC of Texas Gulf Coast functions. d by Merit Shop Training, Inc. (MSTI), I hereby d all harm or injury which I might suffer while
attending such classes or while in transit to a		Classes Registered For:
Date:		
Comments:		
F	OR OFFICE USE	ONLY
Fall 20		Phone/Internet Registered
Spring 20		Approved forClasses & Coop
Summer I 20 Summer II 20		Phone Approval: Company Rep./ MSTI Initial / Date
MERIT SHOP REPRESENTATIVE	(COMPANY TRAINING DIRECTOR