



REGISTRATION FORM

Online Course Title: CERTIFIED ASSISTED LIVING ADMINISTRATOR

Online Course Begins: _____

Online Course Ends: _____

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE: _____ EMAIL: _____

- 1) A non-refundable registration fee is required to secure your seat in the **CALA** class.
- 2) The full amount is due before the class begins.
- 3) Make sure the credit card address and the billing address is the same.



Check one: Deposit: (Non-refundable) \$250 deposit **OR** Full Amount \$1,700

Check one: Visa MC Amex Discover

Credit Card#: _____ **Exp:** _____ **3-digit code:** _____

*If you need assistance, please do not hesitate to call us at: **(800) 401-3966** or email us at: **www.valorianedu.com register online!***

Contact Us!
*Our goal is to provide
superior customer service
from start to finish!*

