

**SUCCESSFUL SUBROGATION I:
A Correspondence Course for Restoration Contractors
(formerly called Successful Subrogation)**

Directions:

This form is to be used for ordering student study materials for Successful Subrogation I: A Correspondence Course for Restoration Contractors. *All course participants are required to complete this course before taking Successful Subrogation II: An Advanced Course for Restoration Contractors.* Each course comes with detailed instructions.

Course Registration Fees:

For your firm's initial order the first person registering from your firm the registration fee is \$85, for the second person registering from your firm the registration fee is \$55, and, for all of those *after* the first two registrations, the fee is \$50. All additional orders beyond your firm's initial order cost \$60 each.

Payment: Check (payable to William Stewart Associates, Inc. and mailed to address at bottom), or credit card information (mailed or faxed to 732-942-0412 – no phone orders please).

Who Should You Order Student Study Materials for?

- Any person in your firm that may be the first person at the scene of a loss.
- Anyone who writes estimates.

Please provide (print) the following information:

Name of Person Ordering Materials:		
Company Name:		
Company Address:		
Phone No.		Fax No.
Quantity	<u>Initial Orders Only</u>	Amount
1	The first set costs \$85	\$85
1	The second set costs \$55 - fill in \$55 under "Amount" if you are ordering more than one set.	
	Indicate the quantity of the sets you are ordering beyond the first two, and multiply this number by \$50 and fill in total under "Amount."	
	All additional orders (beyond your firm's initial order) cost \$60 each. Indicate your order quantity, multiple by \$60 and fill in total under "Amount."	
	TOTAL	

Credit Card Information: (Visa, Mastercard, Amex, Discover) fax credit card orders to 732-942-0412)

Credit Card Number:

Expiration Date: Security Code:

Name (as it appears on credit card) _____

Billing Address (Street or P.O. Box) _____

(City, State, Zip) _____

Signature _____

*Claims Training Services, A Service of William Stewart Associates, Inc.
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