



**ADME, INC**  
**APOLLO**

**APOLLO TRAINING REGISTRATION FORM**

FOR APOLLO PRODUCT TRAINING IN NEWPORT BEACH, CALIFORNIA U.S.A. ON:

**, 2025**

**I. ATTENDING COMPANY:** \_\_\_\_\_

Address: \_\_\_\_\_

Co. Tel: \_\_\_\_\_

Co. Fax: \_\_\_\_\_

Web: \_\_\_\_\_

Socials: \_\_\_\_\_

**II. ATTENDEE'S NAME/S** (Please TYPE or PRINT)

**ATTENDEE'S E-MAIL** (For Registration Confirmation & Info)

1. \_\_\_\_\_

E-Mail: \_\_\_\_\_

Position/Title: \_\_\_\_\_

\*Note: \_\_\_\_\_

2. \_\_\_\_\_

E-Mail: \_\_\_\_\_

Position/Title: \_\_\_\_\_

\*Note: \_\_\_\_\_

3. \_\_\_\_\_

E-Mail: \_\_\_\_\_

Position/Title: \_\_\_\_\_

\*Note: \_\_\_\_\_

4. \_\_\_\_\_

E-Mail: \_\_\_\_\_

Position/Title: \_\_\_\_\_

\*Note: \_\_\_\_\_

If more than four, please use a separate sheet for your list

*\*Please note any dietary restrictions or requests for the catered lunch.*

**III. REQUESTOR** (Owner/Manager/Supervisor or Self, please note sections III, IV and VI must be completed and signed to process registration)

Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Title: \_\_\_\_\_

Tel/Cell: \_\_\_\_\_

Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

**IV. REQUESTING COMPANY:** \_\_\_\_\_

Address: \_\_\_\_\_

Co. Tel: \_\_\_\_\_

Co. Fax: \_\_\_\_\_

Web: \_\_\_\_\_

Socials: \_\_\_\_\_

**V. Purchase Order #:** (Optional for Billing Purposes) \_\_\_\_\_

**VI. METHOD OF PAYMENT** - Please check one

\_\_\_\_\_ VISA, MASTER CARD, DISCOVER or AMERICAN EXPRESS - Please call: **949-852-8178** to provide credit card information over the phone to the Training Coordinator.

\_\_\_\_\_ MAIL A CHECK (Domestic only) - Please **make check payable to ADME Inc.** and mail to: ADME Inc. / APOLLO, 3610 Birch Street, Newport Beach, CA 92660 U.S.A.

\_\_\_\_\_ WIRE TRANSFER - Please e-mail **proof of wire transfer** to Jackie Papillon in ADME, Inc. Billing at **papillonj@apollo-security.com**

**INITIAL HERE:** \_\_\_\_\_ **THAT YOU HAVE READ THE ADME, INC. PAYMENT, REGISTRATION & CANCELLATION POLICY BELOW**

- Payment for the training **must be received** in order for the Attendee **to be confirmed as registered** for the training.
- Payment must be **received and processed no later than 7 days prior** to the first day of the training date.
- Cancellations must be **in writing** (e-mail) and received **no later than 3 days prior** to the first day of the training date.
- Cancellations made **after 3 days prior** to the first day of the training date will be billed a **20% cancellation fee**.

**To register, please complete this form and e-mail to: greenr@apollo-security.com or Fax to: 949-852-8172**