



Certificate Order Form

Date: _____

Please print information clearly.

Attention/Contact for Delivery Address: _____

Bill to Address:

Ship to Address (Federal Express cannot ship to P.O. Boxes):

Phone: _____

Email: _____

<i>Qty.</i>	<i>Description</i>	<i>Net Each</i>	<i>Total</i>
	Basic Rigger Wallet ID Card		
	Competent Rigger Wallet ID Card (company attests that the student meets the minimum of 3 years of tower work experience with this order.)		
	Competent Rigger Upgrade (company attests that the student meets the minimum of 3 years of tower work experience with this order.) <i>*Student must have been trained by the same company within the previous 6 months as a BASIC Rigger.</i>		
	STUDENT PHOTOS MANDATORY https://www.comtrainusa.com/instructor-photo-tool/ <i>Scan the QR code if you are uploading from your phone.</i>		MANDATORY

SHIPPING AFTER PROCESSING:
 Regular Mail: FREE
 Overnight Delivery: \$35.00
 Expedited Service: Call for pricing

Total: _____
Shipping Charge (to the left): _____
Additional Charge (if any): _____
Total Due: _____

***All orders will be processed within 5-7 business days upon receipt of required documentation, information and payment. *
 Expedited Orders must be Pre-Approved – please call Comtrain. * Expedite Fee will apply**

(We will not be liable for the names misspelled on this form. \$45.00 fee for changes after printing.)
 **Please print a list of names to be certified. Use attached sheet.

Company Name: _____

PAYMENT OPTIONS (check your preference)

1. Provide credit card information over the phone. Comtrain will contact the person below for credit card information.
2. Request an invoice for payment over a secure link. A final invoice with a secure payment link will be emailed to the contact.

Name: _____ **Phone Number:** _____

Email Address: _____

**Orders will be put in line for processing upon receipt of payment and required class documents.
 Processing time is 4 to 5 business days.**

Certificate Orders will NOT be processed without student photos

Cancellation: NO REFUNDS



Student Name: _____	Basic	Competent
Student Name: _____	Basic	Competent
Student Name: _____	Basic	Competent
Student Name: _____	Basic	Competent
Student Name: _____	Basic	Competent
Student Name: _____	Basic	Competent
Student Name: _____	Basic	Competent
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