Feliz Safety Solutions, LLC

Food Safety Handlers/Manager's Class Information Form

Student Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Home Phone: ( ) _____ S.S. Number (last 4 digits): _____

E-Mail: _____

Food Position/Job: _____

Class Information

.

Food Safety Course Desired

☐ Food Handlers-8 hours

☐ Food Manager-16 hours

Fee

☐ Food Handlers-$185* ☐ Food Manager -$285*

*Fee includes Text Book, Exam Questions and Answer Sheets **Reduced Group rates offered

***Downpayment of 25% at time of scheduling is expected

Payment Method

☐ Cash ☐ Money Order

☐ Check ☐ Credit/Debit Card*

Class Dates (Scheduled 30 days out to insure proper understanding of Food Safety Terminology)

☐ Jan-Feb ☐ May-June ☐ Sept-Oct

☐ March-April ☐ July-Aug ☐ Nov-Dec