



Gold Class Application

PLEASE CHECK BELOW

- New Applicant
- Renewing Applicant (Current Gold Class # _____)

BUSINESS INFORMATION (PLEASE PRINT)

Gold Class points may not be awarded for up to 45 days after training has been completed. Please consider this before submitting your application.

Name of person to be listed in the I-CAR Gold Class Professionals® International Directory _____ E-mail Address _____

Name of Business _____

Street Address _____

City _____ State _____ ZIP Code _____

(_____) (_____)

Telephone Number _____ Fax Number _____

Type of Business _____ Web Site Address _____ Number of employees at this business location _____
(collision repair, insurance, etc.)

PAYMENT METHOD

Registration/Processing Fee: _____ US: \$ 150.00

Please enclose the registration/processing fee with your application to be considered for membership. Please note the \$50 processing fee is non-refundable. If your application is not approved, the \$100 registration fee will be refunded.

- YES! I want to order my Gold Class Professionals Kit** (Please allow 2-3 weeks for delivery)
This kit includes 1 outdoor sign, 1 custom wooden plaque, 200 document holders.



You may choose to purchase items separately, or other Gold Class merchandise. See www.i-car.com for details.

US Gold Class Kit (includes applicable state sales tax): \$ 270.00

Total (for Registration/Processing Fee and Gold Class Kit): _____ US (includes applicable state sales tax): \$ 420.00

PAYMENT INFORMATION

Mail form and payment or fax form and credit card information to:

I-CAR Training Support Center
5125 Trillium Boulevard
Hoffman Estates, IL 60192, USA

Phone: 800.422.7872
Fax: 800.590.1215
Email: customercare@i-car.com

- Check or Money Order (Make payable to I-CAR)

Check/Money Order Number: _____

- Credit Card Visa Mastercard AMEX Send receipt

Card Holder's Name (Please print) _____ \$ _____
Amount to Charge

Credit Card Number _____ Exp. Date _____ Security Code _____

Card Holder's Signature _____

Billing Address _____

City _____ State _____ ZIP Code _____

For Internal Purpose Only:

KEY _____ AMT _____

CK# _____ REG _____

