



Course Bundle Monthly Subscription Registration Form

Please fill in the form below. Submit this along with the contract and payment.

***All information required for processing.**

***(Contact) First Name:** _____ **Last Name:** _____

***Company Name:** _____

***Business Address:** _____

***City:** _____ **State:** _____ **Zip Code:** _____

***Group Contact Phone Number:** _____

***Group Contact Email:** _____

***How many participants?** _____ 10-50 _____ 51-99 _____ 100-500 (Max)

***How many classes?** _____ 3 _____ 6 _____ 9 (All Classes)

***Duration:** _____ 3 Months _____ 6 Months _____ 9 Months _____ 12 Months

Review the Group Classes Website: www.arhampton.com/groupclasses

***Which Classes?** (Put an X in the blank for each selection.)

_____ Business Grammar

_____ Proofreading Power Basics

_____ Copyediting Basics 101

_____ Public Speaking Skills

_____ Diversity in Workplace Writing

_____ Smarty Pants Vocabulary Builders

_____ Grammar Essentials Jump-start

_____ Workplace Grammar and Style

_____ Grant Writing Essentials

Next Steps: 1) Email this completed form to ashan@onyxedonline.com.
2) Receive an invoice of charges for your review.