

Training Registration (Concordance®, LAW PreDiscovery™, CaseMap®, TextMap®)

Attendee Information (One Per Form):	Billing Information (If Different):
Name/Title	Name/Title
Company	Company
Street	Street
City, State, Zip	City, State, Zip
Phone	Phone
E-mail	E-mail
Check any that apply: ☐ Premier Distributor or ASP ☐ Distinguished [Distributor ☐ Enterprise License ☐ CCST/CCSA ☐ Hosted FYI™ Client
How did you hear about our training? ☐ Attendee/User ☐ E-mail ☐ S	
Class Selection Indicates the classes you would like to register for. Dates and loc Standard	ations must match those listed on the website. Certification
Classes	Classes
Class Location	Class Location
Attendance Date	Attendance Date
Please Note: Payments must be received at least one week prior to class or your registration may be canceled (with the exception of POs). Once your payment is processed, you will receive a confirmation via e-mail or mail with details about the class.	Payment/Registration Fees
	Total Payment \$
	☐ Check payable to LexisNexis (mail with form)
All classes are non-refundable; date/location changes can be made if notice is received at least five days prior to class. LexisNexis reserves the right to cancel any training class.	PO# (only if required)
	Credit Card
Some classes have prerequisites, as indicated on our website. Please send me a copy of the invoice for my records.	Card Number
	Expiration (MM/YY)
Send registration and change request to: Litigation Services Training Registration	Cardholder Name
13427 NE 16th Street Bellevue, WA 98005 Phone: 425-463-3546 Fax: 866-960-2761	Signature
E-mail: litservtraining@lexisnexis.com	

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Print this form and then fax it to: 866-960-2761